

# EMPLOYMENT APPLICATION



Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

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Please print or write – Do Not Type

Last Name		First		Middle		Date	
Street Address						HOME Telephone Number	
City, State, Zip						CELL Phone Number	
e-mail address:						Social Security Number:	
Position Desired						Hourly pay expected	
When CAN you work? (Circle) Days: Sun Mon Tue Wed Thur Fri Sat Nights: Sun Mon Tue Wed Thur Fri Sat						When can you start?	
When CAN'T you work Circle) Days: Sun Mon Tue Wed Thur Fri Sat Nights: Sun Mon Tue Wed Thur Fri Sat						Are you able to work overtime if asked?	
Do you have any problems working Nights or Weekends?				Are you Serv-Safe Certified?			
				Circle Answer: YES NO			

Name & Location of School	Circle Year Comp	Are you still Attending?	Subjects Studied And Degree(s)
High School	1 2 3 4	Yes No	
College	1 2 3 4	Yes No	

PREVIOUS EMPLOYMENT				
Date	Name, Address and Telephone Number of Employer	Position	Supervisor	Reason you left
From / /				
To / /				
From / /				
To / /				

The information provided in this Employment Application is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of any offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

DATE \_\_\_\_\_ Signature \_\_\_\_\_

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