

EMPLOYMENT APPLICATION

Name:	Phone# Email				
Date:					
Address:					
Are you at least 18 years of age? Yes /	No				
Are you at least 16 years of age? Yes/ N	No				
How did you learn of us?				_	
When will you be able to start working	?				
What is your availability? Mon. Tues	s. <u>Wed</u> .	Thurs.	<u>Fri</u> .	<u>Sat</u> .	Sun.
Include Time					
How many hours would you like to wor	rk per weel	k?			
Position Applying for?	Desired Wage Range?				ge?
Five Years Previous Employ	yment (Use	Back if	neces	sary)	

Company * Contact Name and Phone * Position * Dates Employed * Reason For Leaving * Wage(Start/Last)