

EMPLOYEE APPLICATION DATE _____

NAME _____ AGE _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

HOME ADDRESS: STREET _____

CITY, STATE, ZIP _____

SCHOOL ADDRESS: STREET _____

CITY, STATE, ZIP _____

PHONE#: HOME _____ YEAR IN SCHOOL _____

SCHOOL _____ EXPECTED GRAD DATE _____

ARE YOU AVAILABLE TO WORK WEEDENDS/ SCHOOL BREAKS? _____

WHAT IS THE NUMBER OF NIGHTLY SHIFTS YOU ARE AVAILABLE TO WORK? MON _____ THUR _____

TUE _____ FRI _____

WED _____ SAT _____

PLEASE LIST ANY WORK EXPERIENCE/ PREVIOUS JOBS

EMPLOYER _____ EMPLOYER _____

JOB TITLE _____ JOB TITLE _____

SUPERVISOR _____ SUPERVISOR _____

ADDR/PHONE# _____ ADDR/PHONE# _____

LIST ANY PREVIOUS MILITARY SERVICE _____

DO YOU BELONG TO ANY EXTRACURRICULAR ACTIVITIES OR GROUPS _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY _____

OTHER INFORMATION YOU WOULD LIKE US TO
CONSIDER _____

REFERENCES (NOT RELATIVES)NAME & PHONE #
