

# Jake's Quechee Market & Cafe

Date: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Full Name: \_\_\_\_\_  
Last First M.I.

## Employment Application

### Applicant Information

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Date available: \_\_\_\_\_ Desired salary: \_\_\_\_\_

I am available:  Full-time  Part-time  Temporary  Seasonal

If hired, can you furnish proof that you are eligible to work within the US?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you able to meet the attendance requirements for the position?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you been convicted of a criminal offense (felony or misdemeanor) in the last 7 years?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, please explain:	
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, when?	

### Education

	Name of school	City, State	Graduated? (yes/no)	Years attended	Degree/Major
High School:					
College					
Other					



## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

## Please answer the following questions

Why do you want to work at Jake's Quechee Market & Café?

Give us a definition of what world-class customer service means to you.

Tell us about a time you had to assist a difficult customer. How did you resolve it?

Skills and qualifications: Summarize any training, skills, and/or certifications that are relevant to this position.

Are there any health related conditions that would prevent you from performing your assigned tasks?

## Disclaimer and Signature

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

*I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.*

*I give the employer the right to obtain pertinent information concerning me from former employers and others, and I release all those providing or requesting such information from any liability that may arise by truthful disclosures or such investigations.*

*If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.*

*I understand it is the company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.*

*I also understand that if I'm hired, I will be required to provide proof of identity and legal work authorization.*

Your signature acknowledges you have read and agreed to the material above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_