



## Employment Application

### Applicant Information

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

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

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

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

Date of Birth: \_\_\_\_\_ Date Available: \_\_\_\_\_ Desired Hourly Rate: \$ \_\_\_\_\_  
(must be at least 15 yrs. old)

Position Applied for: \_\_\_\_\_

**Available**

- Hours:**
- |                  |                                       |  |
|------------------|---------------------------------------|--|
| <b>Monday</b>    | <input type="checkbox"/> 1:45-6:45pm  | <input type="checkbox"/> 6:45-11:15pm                                      |
| <b>Tuesday</b>   | <input type="checkbox"/> 1:45-6:45pm  | <input type="checkbox"/> 6:45-11:15pm                                      |
| <b>Wednesday</b> | <input type="checkbox"/> 1:45-6:45pm  | <input type="checkbox"/> 6:45-11:15pm                                      |
| <b>Thursday</b>  | <input type="checkbox"/> 1:45-6:45pm  | <input type="checkbox"/> 6:45-11:15pm                                      |
| <b>Friday</b>    | <input type="checkbox"/> 1:45-6:45pm  | <input type="checkbox"/> 6:45-12:15am                                      |
| <b>Saturday</b>  | <input type="checkbox"/> 10:45-3:00pm | <input type="checkbox"/> 2:45-7:00pm <input type="checkbox"/> 6:45-12:15pm |
| <b>Sunday</b>    | <input type="checkbox"/> 10:45-3:00pm | <input type="checkbox"/> 2:45-7:00pm <input type="checkbox"/> 6:45-11:15pm |

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for Blank Slate Creamery? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

### References

Please list two professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Wage:\$ \_\_\_\_\_ Ending Wage:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

\_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Wage:\$ \_\_\_\_\_ Ending Wage:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

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

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

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

**Essential Job Duties**

Certain diseases, including hepatitis A, salmonella, shigella, staphylococcus, streptococcus, giarda, E. coli and campylobacteria may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves handling and serving food, food service equipment and utensils in a sanitary and healthy fashion. Is there any reason why you cannot perform the essential functions of this job?

YES  NO

If yes, please explain.

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal. I authorize the references listed in this application to provide any information concerning previous employment and pertinent information they may have, personal or otherwise and release all parties from all liabilities for any damages that may result from furnishing this information.*

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