

Sweet Dreams

Tasty Treats

Employment Application

Applicant Information								
Full Name:					Date:			
	Last	First			М.І.			
Address:	Street Address					Apartment/Unit #		
	City				State	ZIP Code		
Phone:			Email					
Date Availa	ble:	Social Security No.:_			Desired S	Salary: \$		
Position App	olied for:							
Are you a citizen of the United States?								
YES NO Have you ever been convicted of a felony? □ □ □								
		Edu	ucation					
High School: Address:								
From:	To:	Did you graduat	YES e? □	NO □	Diploma:			
College:		Addres	ss:					
From:	То:	Did you graduat	YES e? □	NO □	Degree:			
Other:		Addres	ss:					
From:	То:	Did you graduate	YES e?	NO □	Degree:			
		Refe	erences					
Please list three professional references.								
Full Name:					Relationsh	ip:		
Company:					Phor	ne:		
Address:								
Full Name:					Relationsh	ip:		
Company:					Phor	ne:		
Address:								

Full Name:		Relationship:				
Company:				Phone:		
Address:						
	Previous E	mploym	nent			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting S	Starting Salary:\$				
Responsibil	ities:					
From:	То:	Reason	for Leaving:			
May we con	tact your previous supervisor for a reference?	YES	NO □			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting Salary:			Ending Salary: <u>\$</u>		
Responsibil	ities:					
From:	То:	Reason	for Leaving:			
May we con	tact your previous supervisor for a reference?	YES				
Company: Address:				Phone: Supervisor:		
Job Title:				Ending Salary:		
Responsibil	ities:					
From:	То:	Reason	for Leaving:			
May we con	tact your previous supervisor for a reference?	YES				
	Hours of <i>I</i>	Availabi	lity			
Are you able	e to work evenings/nights? YES NO		Are you ab	le to work weekends?	YES	NO □
How many h	oours are you available to work per week?		What is you	r desired start date?		

Please state hours available to work below:

*Store hours are **Thursday** 4PM – 8PM; **Friday** 4PM – 9PM; **Saturday** 12PM – 9PM; **Sunday** 12PM – 8PM Hours are subject to change during the Summer season.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
From:				From:	From:	From:	
To:				To:	To:	To:	

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 release.

Signature:

Date: