



MRS. WALKER'S ICE CREAM FORKED RIVER

Employment Application

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Cell:		E-mail Address			
Date Available		AGE		Date of Birth	
Weekend Availability (it's our main priority Friday, Saturday, Sunday) _____					
Do you have any other jobs or obligations		YES	NO	If so, when?	
Are you going away to college? Locally preferred if you aren't experienced.		YES	NO	If so where?	
What is a favorite hobby of yours?					
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES	NO	Degree
College			Address		
From	To	Did you graduate?	YES	NO	Degree
Other			Address		
From	To	Did you graduate?	YES	NO	Degree
REFERENCES					
<i>Please list one professional reference.</i>					
Full Name				Relationship	
Company				Phone ()	
Address					
Full Name				Relationship	
Company				Phone ()	
Address					

PREVIOUS EMPLOYMENT

Company	Phone ()
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Address	Supervisor
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Job Title	Starting Salary \$	Ending Salary \$
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Responsibilities

From	To	Reason for Leaving
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May we contact your previous supervisor for a reference? YES NO

Company	Phone ()
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Address	Supervisor
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Job Title	Starting Salary \$	Ending Salary \$
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Responsibilities

From	To	Reason for Leaving
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ANY OTHER INFORMATION YOU WOULD LIKE TO SHARE?

DISCLAIMER AND SIGNATURE *******HAND APPLICATION BACK TO MATT IN STORE*******

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
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