



APPLICATION FOR EMPLOYMENT

Please print clearly in ink

Name _____							
Last	First	Middle	Maiden				
Present address _____							
Number	Street	City	State	Zip			
How long _____		Home Phone () _____		Cell Phone () _____			
Opening shifts begin at 6:30A. Closing shifts end at 9:30P. Indicate availability in <u>time</u> (e.g. 6:30a – 2p; 2p – 9:30p, etc)							
Shift	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Opening							
Other							
Closing							
Date available to start? _____							
Are you available during holidays? (please note any exceptions) _____							
Are you 18+? Yes No		Are you 21+? Yes No					
Do you have reliable transportation to and from work? Yes No							
Are you eligible to work in the United States? Yes No							
Have you been convicted of or pleaded no contest to a felony within the last five years? Yes No							
If yes, please explain:							

EDUCATION

Name and address of school	Name and address of school	Name and address of school
Highest grade completed:	Highest grade completed:	Highest grade completed:
Date: Degree? Y N	Date: Degree? Y N	Date: Degree? Y N

Use the space below to elaborate on your knowledge of gourmet foods, coffee, customer service, and any related retail experience.

OVER

EMPLOYMENT HISTORY

Company Name, Address, Phone:	From: Reason for Leaving:	To:
Position Title: Responsibilities:	Supervisor Name/Title: May we contact this employer: Yes No	

Company Name, Address, Phone:	From:	To:
	Reason for Leaving:	
Position Title: Responsibilities:	Supervisor Name/Title: May we contact this employer: Yes No	

Company Name, Address, Phone:	From:	To:
	Reason for Leaving:	
Position Title: Responsibilities:	Supervisor Name/Title: May we contact this employer: Yes No	

REFERENCES

Name, e-mail, phone:	Relationship:
Name, e-mail, phone:	Relationship:
Name, e-mail, phone:	Relationship:

I certify that the information contained in this application is true and complete. I understand that providing false information will disqualify me from employment and is grounds for immediate termination of employment at any point in the future.

I authorize the verification of any or all information listed above.

Signature of applicant _____ Date: _____