



Applicant Information

Last Name:	First Name:	M.I
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Street Address:	Apartment/Unit #:
City/Town:	State:

Date of Birth:	Current Grade:
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Phone:	Email:
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In case of an emergency, whom should we contact?	
Phone:	Relationship to Applicant:

Please, when answering the following questions, give some thought to your answers. We need responsible individuals that can work during the spring, summer and fall. Thank you.

When are you able to work?	<input type="checkbox"/> SPRING (March-May)	<input type="checkbox"/> SUMMER (June-Aug)	<input type="checkbox"/> FALL (Sept-Nov)
When are you able to start?			
How many hours a week are you available?		How many shifts a week are you available/looking to work?	

<input type="checkbox"/> Are you able to work school nights?	<input type="checkbox"/> Are you able to work ALL summer long?
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Any other availability information? Days available? (Any specific details you can share is helpful):
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<u>Work Experience:</u> If you have any previous work experience, please list it below. If not, you can state 'No prior work experience'. Customer Service? Handling money? Teamwork?

Previous Employer:	Phone:
Previous Employer:	Phone:

Signature _____ Date: _____