

BROOKS★NORTHPORT★SWAN LAKE★QWIK STOP

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name:				
	First	Middle Initial	Last	
Address:				
Phone #		Cell #		
			If no, are you authorized to work in the US? YES	NO

POSITION / AVAILABILITY

Position Applied for: _____

As we are a store that operates nights and weekends, it is important that we clearly understand what days and times during each day (or night) that you are available to work. For each day below, write in the hours or times that you are available. Remember to indicate the absolute earliest time to the time that you can work each day. If you are unavailable on a particular day, write in "Not Available".

It is important to understand that we work in a retail environment where much of our business is done during afternoons and on weekends.

N de la d	From the following list, please indicate the positions in which
Monday	You are interested:
Tuesday	Cashier
Wednesday	Stock Clerk
Thursday	Bakery/Deli
Friday	Produce
Saturday	Meat Room
Sunday	Other

 What is the minimum number of hours you can work per week?

 What is the maximum number of hours you can work per week?

 Are you available to be called in?

 YES

 NO

 What date are you available to start work?

EDUCATION

Name / Address of School	Degree/Diploma	Graduation Date

Skill and Qualifications: Licenses, Skills, Training, Awards: _____

EMPLOYMENT HISTORY

Company		Phone ()		
Address		Supervisor		
Job Title Sta		Starting Salary \$		Ending Salary \$
Responsibilities				
From To		Reason for Leaving		
May we contact your previous supervisor for a reference? YES NO				

Company		Phone ()		
Address		Supervisor		
Job Title Starting Salary		\$	Ending Salary \$	
Responsibilities				
From	То		Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO				

Company			Phone ()	
Address		Supervisor		
Job Title Starting Salary		\$	Ending Salary \$	
Responsibilities				
From To		Reason for Leaving		
May we contact your previous supervisor for a reference? YES NO				

REFERENCES

Please list three professional references

Full Name	Relationship
Company	Phone ()
Address	

Full Name	Relationship
Company	Phone ()
Address	

Full Name	Relationship
Company	Phone ()
Address	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may result in my immediate release. I authorize the verification of any or all information listed above.

Signature _____ Date _____