## Team Member Application

## Charlie's Silver Spoon Creamery

Position applying for: \_\_\_\_\_

	Cross position applying for:						
			TEAM MEMBER	R INFORMATION	ON		
Last Name:	ast Name: First			t Name:		Preferred Name:	
Telephone:			Email: _				
Address:				City:		State: Zip: _	
, ,			•		t accommodations ing, scooping, custor	s? YES N mer service, and pho	
□I am at least 16 years old. □I am at le		at least 21 years o	st 21 years old.			ed States.	
Have you been o	onvicted of a c	crime? If so, pleas	se explain:				
			AVAILA	ABILITY			
Please list below a	ll times for which		to work with us. Kee			e with your availabilit	
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Suriday	ivioriuay	Tuesday	Wednesday	Titursuay	Filuay	Saturday	
Do you have any	prior commit	ments after your	start date? If so,	please explair			
Will this be a sea	isonal or perm	anent position? _		How	many hours per v	veek do you desire	
			EDUC	ATION			
	Insti	tution Name	Years Co	mpleted	Field of Study	Graduate	or Degree
High School				·			
College / Unive	ersity						
Other	, l						
			REFER	ENCES			
	•	eferences who are					
Name	ame Telephone		Occu	Occupation		ínown	Relatio
Name	т	elephone	Occur	pation	Years K	nown	Relatio

	FMPI OVN	ЛENT HISTORY			
Please list your previous and/or curr					
□I am currently employed. □	ll have no previous work expe	rience.			
□You may contact my current e	mployer.				
Employer Name:		Position Title:			
Address:	Telephone:				
Please summarize job descriptio	n and responsibilities below:				
Pay/Per: \$	State Date:	End Date:			
Employer Name:		Position Title:			
Address:		Telephone:			
Please summarize job descriptio	n and responsibilities below:				
Pay/Per: \$	State Date:	End Date:			
Reason for leaving:					
	QUES	TIONS			
How did you hear about us?					
Have you visited our shop before	e? What was your experience	like?			
Why are you interested in this co	ompany?				
What skills or qualifications do you have that make you a strong candidate for Charlies Silver Spoon Creamery?					
What are the values you look for	n a place of employment?				
What would you hope to gain fro	om employment with us?				
What do you feel is the single	most important quality, trait	, or skill for a team member to possess?			

	CONTACT	
In case of accident or illness, please contact	t:	
Name:	Daytime Phone:	
Address:	Relationship:	
	IMPORTANT TO THE APPLICANT	
	ur employment application, your personal and employment references may be sapplication, and are subsequently hired, you may be discharged from your job the checking of your references.	'
	required to: supply your birth certificate or other proof of authorization to work, or to sign a conflict of interest agreement and abide by its terms. I underst	•
Signature of Applicant		Date

**Equal Employment opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.

Rev. 8/2019

**Employment Application**