

Signature:

EMPLOYEE APPLICATION

FOR EMPLOYER USE ONLY:
Call back:
Date Interviewed:
Remarks:

Thank you for showing your interest in Doozle's Frozen Custard! Here are a few things we look for in future employees. If you can answer YES to these questions, please continue our application.

available to work more than just the summer months friendly and outgoing with the public ready to work at least one weekend night each week can work well in a group environment Which location are you applying for? ☐ Florissant ☐ St. Charles **ABOUT YOU** Full name: Date: First Last Address: Phone # Apt/Unit # Street address Email: City State Zip Code No \square Are you 16 years or older? Yes □ Date of Birth: Were you referred by a current/prior employee? If yes, who? JOB AVAILABILITY On average, how many hours do you wish to work a weel Are you involved in any sports/activities that we would need to alter your work schedule around? Please list all: We strive to schedule our employees very fairly. With that being said, do you understand that this job involves working nights, weekends, and some holidays (Easter, Mother's/Father's Day, July 4th, Halloween, ect.) Yes \Box **WORK EXPERIENCE** Position **Dates Employed** Company Name Reason for Leaving REFERENCES Phone # Name Years Known Phone # Name Years Known **EDUCATION** Currently Enrolled Yes □ High school: Did you graduate Yes □ No □ No □ Currently Enrolled Yes □ College No □ Did you graduate Yes □ No □

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I

Date turned in:

understand that false or misleading information in my application or interview may result in my release.