Stanga Enterprise

If you are seeking employment, please fill out the application below.

We have several other stores that may have positions available so be sure to fill out the entire application.

Legal name
Preferred name
Contact Information Phone number Email Address Date of birth
Home Address
Wages Desired starting pay \$
Desired start date
Employment Special skills pertaining to employment
Current job and reason for leaving
Start and finish dates (month and yr)
Previous job and reason for leaving
Start and finish dates (month and yr)
Can we contact your previous employers? Y / N. If so, list their name and phone number:

Circle the field(s) you might be interested in:

*Customer service/cashier *Drink Runner/Server	*kitchen/grill *Bartender	*Ice cream & concession	*prep/stock
Do you have an ABC License Y/N			
Date of expiration			
Are you a U.S. Citizen? Y / N			
Last level of education compl	eted		
Have you ever been convicte	d of a felony? Y/N		
Emergency contact: #			
********Please understand tha submission of your applicatio		opportunity employer AND that t	he
, ,	•	ne above information is true and cose information given, may result in	•
Signature of applicant		_	
Date			