

MARS HILL BIBLE SCHOOL
APPLICATION FOR Food Services/Cafeteria Employment

Name: _____

Date of Birth: _____ SS# _____

Address: _____
Street City Zip

Home Telephone: _____ Cell: _____

Male: _____ Female: _____

Name of school and highest grade completed: _____

Church Congregation: _____

Two personal references (not former employers)

Name	Address	Phone
_____	_____	_____
_____	_____	_____

Employment References	Dates	Position	Reason for leaving
_____	_____	_____	_____
_____	_____	_____	_____

Are you now employed? _____ If so where: _____

May we contact your present employer? _____

Have you lost time from work due to an accident or serious illness? _____

If yes explain: _____

Do you have back problems? _____ Do you have feet or leg problems? _____

Have you ever collected Workman's Compensation? _____

List any type of food services work: _____

Do you have any children or relatives at Mars Hill? _____

If yes, name and relationship: _____
