



Application for Employment

Sweet Spoon Creamery is an Equal Opportunity Employer

SECTION B: EMPLOYMENT INFORMATION (PLEASE START WITH MOST RECENT FIRST)

Job Title:	Start Date:	End Date: <input type="checkbox"/> Check if still employed
Company Name:	Supervisor's Name:	Phone Number:
Address: (Street, City, State, ZIP Code)		
Duties:		
Reason for Leaving:	Starting Salary:	Ending Salary:

May we contact this Employer? Yes No

Job Title:	Start Date:	End Date: <input type="checkbox"/> Check if still employed
Company Name:	Supervisor's Name:	Phone Number:
Address: (Street, City, State, ZIP Code)		
Duties:		
Reason for Leaving:	Starting Salary:	Ending Salary:

May we contact this Employer? Yes No



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SECTION B: EMPLOYMENT INFORMATION (Continued)

Job Title:	Start Date:	End Date: <input type="checkbox"/> Check if still employed
Company Name:	Supervisor's Name:	Phone Number:
Address: (Street, City, State, ZIP Code)		
Duties:		
Reason for Leaving:	Starting Salary:	Ending Salary:

May we contact this Employer? Yes No

Job Title:	Start Date:	End Date: <input type="checkbox"/> Check if still employed
Company Name:	Supervisor's Name:	Phone Number:
Address: (Street, City, State, ZIP Code)		
Duties:		
Reason for Leaving:	Starting Salary:	Ending Salary:

May we contact this Employer? Yes No



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SECTION C: REFERENCES (PLEASE LIST 3 REFERENCES)

First Reference Name:	Relationship:	Length Known:
Email:	Phone:	Title:
Second Reference Name:	Relationship:	Length Known:
Email:	Phone:	Title:
Third Reference Name:	Relationship:	Length Known:
Email:	Phone:	Title:

SECTION D: EDUCATION/QUALIFICATIONS/SKILLS

School/Agency Name:	Degree/Certificate:	Date:
School/Agency Name:	Degree/Certificate:	Date:
School/Agency Name:	Degree/Certificate:	Date:

Skills:



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SECTION E: SUPPLEMENTAL QUESTIONS

Have you been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment) <input type="checkbox"/> Yes <input type="checkbox"/> No		
If so, explain:		
Do you understand the functions/tasks of the job you are applying for? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(Been told or viewed a detailed summary of the job description)		
Are you able to perform all of the essential functions of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If not, explain:		
Do you require reasonable accommodation to perform any functions of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If so, explain:		
Available Start Date:	Desired Pay:	Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations could result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact my references.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship or any offer or acceptance of employment, at any time, with or without cause, and with or without notice to the other party.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education, and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option, and without prior notice to me.

Printed Name:	Signature:	Date: