CHICAGO SCOOPS, LLC EMPLOYMENT APPLICATION

Date: _____/_____/_____

Name: _____ _____ _____

Last First Middle

Address: _____ _____

City, State ZIP

Telephone (_____) _____- _____ E-Mail Address: _____

Birthdate (_____/_____/_____ Friends/Relatives employed by this company: _____

Have you ever worked for Chicago Scoops, LLC before? If so, when? _____

POSITION APPLIED FOR

Job(s) applied for: (a) _____ Desired pay $_____ per hour

(b) _____ Desired pay $ _____per hour

Hours Available	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sun.	Total
FROM								
TO								

What date can you begin work? _____/_____/_____

If hired, do you have a reliable means of transportation? YES NO

Are you employed now? May we inquire of your employer? _____ YES NO

Do you have any problems lifting 20 pounds? YES NO

If yes, please explain why? _____

LIST MOST RECENT WORK EXPERIENCE

Dates (From/To)	Name of Employer		Supervisor name & Title	Reason(s) for leaving

AUTHORIZATION TO WORK STATEMENT

If hired, Federal law requires that you furnish documentation showing your identity and that you are legally authorized to work in the United States. Speak to one of the managers to see what forms of identification will satisfy the work authorization requirements. This identification must be presented to the manager the day you begin orientation.

NO EMPLOYMENT CONTRACT "AT WILL"

No employment contract is intended or created by statements made during the hiring process. It is understood that this employment is AT WILL, and may be terminated at any time by either employer or employee.

APPLICANT SIGNATURE _____