

DATE _____

Social Security Number

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BAKERY EMPLOYMENT APPLICATION

Print
Name: Last: _____ Middle: _____ First: _____

Print Street Address: _____

City: _____ State: _____ Zip Code: _____

How long have you lived at this address? _____ Phone: _____

Age: Over 14? _____ Over 16? _____ Over 18? _____

In case of emergency, notify: Name: _____ Street Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Education: Grade: _____ High School: _____ Business: _____ College: _____

Do you attend school now? _____ If so, what school? _____

If you have any physical disability or serious ailment or sickness, explain: _____

Who referred you to us? _____

Can you operate Cash Register? _____ Bakery Scale? _____

Are you now employed? By whom: _____ Kind of work: _____

Present Salary: _____ Why are you leaving? _____

Employment desired: Position: _____ Salary: _____ Date can start work: _____

Hours you would like to work: _____ Full time: _____ Part time: _____

Retail Food Experience: _____

Previous Bakery Experience: Yes: _____ No: _____ If previous experience, where and for how long at each establishment? _____

PRESENT AND FORMER EMPLOYERS

LIST LAST THREE JOBS HELD (Present or last job first)	Business	Work Duties	Dates
Name: _____			start: _____
Address: _____			ended: _____
Supervisor: _____	Salary: _____	Phone: _____	
Reason for leaving: _____			
Name: _____			start: _____
Address: _____			ended: _____
Supervisor: _____	Salary: _____	Phone: _____	
Reason for leaving: _____			
Name: _____			start: _____
Address: _____			ended: _____
Supervisor: _____	Salary: _____	Phone: _____	
Reason for leaving: _____			

OVER

