

APPLICATION FOR EMPLOYMENT

Babe's Ice Cream Company is an Equal Opportunity Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, gender expression, national origin, age, protected veteran or disabled status, or genetic information.

Name:			Date	
Address:	Last	, First, Middle II	nitial	
Address.				
City:	State:	Zip:	Telephone:	
Position Applied For:			_Wage Requirements:	
Date available to start:				

GENERAL INFORMATION

If hired, are you able to provide proof of authorization to work in the United States? Yes / No

Are you 18 years of age or older? Yes / No

Date of Birth: _____

What days/hours are you not available to work? (Weekend hours are required for scooping positions)

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Morning							
Afternoon							
Evening							

If required, will you work? Rotating Shifts: Yes / No

Overtime: Yes / No

EDUCATION/TRAINING/SKILLS

	Name & Address of School	Major Course Studied	Graduated
High School			
College			

Tech/Vocational/Graduate		

Please list any scholarships, academic honors, awards or special achievements: _____

Interests/Accomplishments: You may wish to list significant experience, interests and accomplishments gained while working as a volunteer, hobbyist, etc. that may be useful in the position(s) you are seeking.

EMPOYMENT HISTORY

Starting with your PRESENT (MOST RECENT) employer, list in consecutive order for the past FOUR employers. If currently employed, may we contact your employer? Yes NO

Company: Telephone:					
Address: City: State: Zip:					
Name & Title of Supervisor:		Position Held:			
List jobs held, duties performed, skills used & promotions while employed at this company:					
Salary Begin & End:	Dates Employed:		Reason for Leaving:		
Company: Telephone:					
Address: City: State: Zip:					
Name & Title of Supervisor:		Position Held:			
List jobs held, duties performed, skills used & promotions while employed at this company:					
Salary Begin & End:	Dates Employed:		Reason for Leaving:		
Company: Telephone:					
Address: City: State: Zip:					

Name & Title of Supervisor:		Position Held:				
List jobs held, duties performed, sk	xills used & promotions while	employed at	t this company:			
Salary Begin & End:	Dates Employed:		Reason for Leaving:			
Company: Telephone:	Company: Telephone:					
Address: City: State: Zip:	Address: City: State: Zip:					
Name & Title of Supervisor:		Position Held:				
List jobs held, duties performed, skills used & promotions while employed at this company:						
Salary Begin & End:	Dates Employed:		Reason for Leaving:			

I certify that the information provided in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. It is acknowledged that Chocolate Shoppe Ice Cream Company may request additional information that is deemed necessary to evaluate my qualifications for employment.

Signature____

_____Date_____