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***Big T’s Snoballs & Food Trucks***

***3609 N. Main St, Hope Mills NC 28348***

***910-568-7722***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| APPLICATION FOR EMPLOYMENT | | | | | |
| PERSONAL INFORMATION | | | | | |
| **Date** Click here to enter a date. | | | | | |
| Name: Click here to enter text. | | | | | |
|  | | | | | |
| **Present address:** Click here to enter text. | | | | | |
|  | | | | | |
| **Telephone:** Click here to enter text.    **E-mail:** Click here to enter text. | | | | | |
| EMPLOYMENT DESIRED | | | | | |
| Position(s) applied for: Choose an item. | | |  | | |
| **Employment desired FULL-TIME ONLY PART-TIME ONLY** | | | | | |
| **When are you available to start work?** Click here to enter a date.  **Days available to work:** Click here to enter text.  **Graduation Date or ETA of Graduation:** Click here to enter a date. | | | | | |
| EDUCATION | | | | | |
| **TYPE OF SCHOOL** | **NAME OF SCHOOL & LOCATION** | **QUALIFICATION OBTAINED** | | **MAJOR & SPECIALISATION** | **NUMBER OF YEARS COMPLETED** |
| **High School** | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| **College/**  **university** | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| **Professional or Graduate School** | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. |

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| WORK EXPERIENCE | | | | | | | | |
| **Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.** | | | | | | | | |
|  | | | | |  | | | |
| **Name of Employer** Click here to enter text. **Address** Click here to enter text. | | **Name of last supervisor** | | **Employment dates** | | | **Pay or salary** | |
| **City, State, Zip** Click here to enter text. **Phone number** Click here to enter text. | | Click here to enter text. | | Click here to enter a date.  Click here to enter a date. | | | **Start** Click here to enter text.  **Final** Click here to enter text. | |
|  | | **Your last job title** Click here to enter text. | | | | | | |
| **Reason for leaving (be specific)** Click here to enter text. | | | | | | | | |
| **List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.** | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
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| **Name of Employer** Click here to enter text. **Address** Click here to enter text. | | **Name of last supervisor** | | **Employment dates** | | | **Pay or salary** | |
| **City, State, Zip** Click here to enter text. **Phone number** Click here to enter text. | | Click here to enter text. | | Click here to enter a date.  Click here to enter a date. | | | **Start** Click here to enter text.  **Final** Click here to enter text. | |
|  | | **Your Last Job Title** Click here to enter text. | | | | | | |
| **Reason for leaving (be specific)** Click here to enter text. | | | | | | | | |
| **List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.** | | | | | | | | |
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| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
|  | | | | |  | | | |
| **Name of Employer** Click here to enter text. **Address** Click here to enter text. | | **Name of last supervisor** | | **Employment dates** | | | **Pay or salary** | |
| **City, State, Zip** Click here to enter text. **Phone number** Click here to enter text. | | Click here to enter text. | | Click here to enter a date.  Click here to enter a date. | | | **Start** Click here to enter text.  **Final** Click here to enter text. | |
|  | | **Your last job title** Click here to enter text. | | | | | | |
| **Reason for leaving (be specific)** Click here to enter text. | | | | | | | | |
| **List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.** | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
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| **Name of Employer** Click here to enter text. **Address** Click here to enter text. | | **Name of last supervisor** | | **Employment dates** | | | **Pay or salary** | |
| **City, State, Zip** Click here to enter text. **Phone number** Click here to enter text. | | Click here to enter text. | | Click here to enter a date.  Click here to enter a date. | | | **Start** Click here to enter text.  **Final** Click here to enter text. | |
|  | | **Your last job title** Click here to enter text. | | | | | | |
| **Reason for leaving (be specific)** Click here to enter text. | | | | | | | | |
| **List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.** | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| Click here to enter text. | | | | | | | | |
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| **Are you currently employed?  Yes  No** | | | | | | | | |
| **May we contact your present employer?  Yes  No** | | | | | | | | |
| **Did you complete this application yourself?  Yes  No** | | | | | | | | |
| **If not, who did?** Click here to enter text. | | | | | | | | |

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| **Have you ever been convicted of a felony?  Yes  No** | | | |
| **If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.** Click here to enter text. | | | |
| Click here to enter text. | | | |
| Have you ever been employed with this company?  Yes  No | | | |
| If yes, when? Click here to enter a date. | | | |
| Do you have any friends or relatives employed by this company?  Yes No | | | |
| If yes, please provide their names and relationship to you. Click here to enter text. | | | |
| REFERENCES | | | |
| Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years. | | | |
|  | | | |
| Name Click here to enter text. | | | Occupation Click here to enter text. |
| Company name Click here to enter text. | Address Click here to enter text. | | |
| Telephone Click here to enter text. | E-mail Click here to enter text. | Years acquainted Click here to enter text. | |
|  |  |  | |
| **Name** Click here to enter text. | | | **Occupation** |
| **Company name** Click here to enter text. | Address Click here to enter text. | | |
| **Telephone** Click here to enter text. | **E-mail** Click here to enter text. | | **Years acquainted** Click here to enter text. |
|  |  | |  |
| **Name** Click here to enter text. | | | **Occupation** Click here to enter text. |
| **Company name** Click here to enter text. | **Address** Click here to enter text. | | |
| **Telephone** Click here to enter text. | **E-mail** Click here to enter text. | **Years acquainted** Click here to enter text. | |