

Island Frozen Yogurt Bar

Employment Application

Directions: Either drop off a copy during business hours or email to mushtan@yahoo.com

| | | Appl | icant | Information | on | | |
|---------------|------------------------------------|--------------|---------------------|------------------|----------|-----------|------------------|
| Full Name: | | | | Date: | | | |
| | Last | First | | | | M.I. | |
| Address: | Street Address | | | | | | Apartment/Unit # |
| | | | | | | | |
| | City | | | | | State | ZIP Code |
| Phone: | | | | Email: | | | |
| Are you aut | horized to work in the U.S.? | YES | S NC | | | | |
| Have you ev | ver worked for this company? | YES | NO | If yes, whe | en? | | |
| How many h | nours per week do you desire | to work? | Mini | mum: | | Maximum:_ | |
| What is you | r availability and is it flexible? | | | | | | |
| When would | d you be able to start, if hired? | | | | | | |
| How long w | ould you expect to work for us | , if hired?_ | | | | | |
| Are you willi | ng to work weekends? | | | YES | NO | | |
| Are you willi | ng to work holidays? | | | YES | NO | | |
| Do you have | e access to an automobile for | work purpo | ses? | YES | NO | | |
| Would you b | pe willing to undertake a drug | test as par | t of the | hiring proce | | ES NO | |
| Can you lift | at least 45 lbs? | YES | NO | | | | |
| Do you pref | er to work alone or with a tean | | NO | | | | |
| Are you willi | ing to work alone? | YES | NO | | | | |
| Is there any | thing that could potentially inte | erfere with | your a | ailability, if l | hired? _ | | |
| If yes, expla | in: | | | | | | |
| | | Ed | lucati | on / Skills | | | |
| What skills | do you have to bring to this job | ? | | | | | |
| What is you | r highest academic level? | | | | | | |
| Are you cur | rently enrolled in college or a h | nigher edu | cation _l | orogram? | _ | NO | |

| Interests/Questions | | | | | | | |
|--|--------------------|----------------|--|--|--|--|--|
| What are your hobbies/extracurricular activities? | | | | | | | |
| What kind music do you listen to, if anything, while you work? | | | | | | | |
| What do you consider your greatest strengths and weaknesses? | | | | | | | |
| Describe your character in a couple sentences: | | | | | | | |
| What is it about this job that enticed you to apply? | | | | | | | |
| How would you define customer service? | | | | | | | |
| How would you deal with an angry customer? | | | | | | | |
| | References | | | | | | |
| Please list three professional references. *OPTIONAL* You can submit resume in lieu. | | | | | | | |
| Full Name: | | Relationship: | | | | | |
| Company: | | Phone: | | | | | |
| Address: | | | | | | | |
| | | Deletionshin | | | | | |
| Full Name: | | Relationship: | | | | | |
| Company: | | Phone: | | | | | |
| Address: | | | | | | | |
| Full Name: | | Relationship: | | | | | |
| Company: | | Phone: | | | | | |
| Address: | | | | | | | |
| P | revious Employment | | | | | | |
| Please list all previous employment. *OPTIONAL* You can submit resume in lieu. | | | | | | | |
| Company | | Dhonor | | | | | |
| Company: | | Phone: | | | | | |
| Address: | | Supervisor: | | | | | |
| Job Title: | Starting Pay: \$ | Ending Pay: \$ | | | | | |
| Responsibilities: | | | | | | | |
| From: To: | | | | | | | |
| | | | | | | | |

| Company: | | Phone: | | | | |
|---|---|--|--|--|--|--|
| Address: | Supervisor: | | | | | |
| Job Title: | Starting Pay: \$ | Ending Pay: \$ | | | | |
| Responsibilities: | | | | | | |
| From: | То: | | | | | |
| _ | Disclaimers and Signature | | | | | |
| employment with the comp Our company, Island Frozen Action employer. We do (including pregnancy, ch | ended to and does not create a contract or pany would be on an at-will basis and coul party. Yogurt Bar, is proud to be an Equal Emplo o not discriminate based upon race, religio hildbirth, or related medical conditions), se tatus as a protected veteran, status as an i | d be terminated at the will of either loyment Opportunity and Affirmative on, color, national origin, gender exual orientation, gender identity, | | | | |
| , , , | applicable legally protected characteris | | | | | |
| I certify that my answers are to | rue and complete to the best of my knowledge | e. | | | | |
| If this application leads to empinterview may result in my rele | ployment, I understand that false or misleading pase. | g information in my application or | | | | |
| Signature: /s/ | | Date: | | | | |
| | | | | | | |

Additional space is provided if necessary.