

Application for Employment

| First Name: | Last Name | | | | | | | |
|---|--|---------------------|--------------------------------|--|--|--|--|--|
| Current Address: | City: | State: | Zip Code: | | | | | |
| Permanent Address: | City: | State | :Zip Code: | | | | | |
| Current Phone Number: | rrent Phone Number:Permanent Phone Number: | | | | | | | |
| Cell Phone Number: | Email Address: | | | | | | | |
| Have you ever been employed by Bu | uffaLouie's or Gables Bagels | in the past? | Y or N | | | | | |
| If so, dates of employment: | Reason | for leaving: | | | | | | |
| Are you legally eligible for work in the United States? Y or N (if hired, verification is required by law) | | | | | | | | |
| Have you been convicted of a crime public record (an arrest is not a conviction). | | | | | | | | |
| Are you of legal age to serve alcoho | l? Y or N | | | | | | | |
| Do you have reliable means of trans | portation to work? Y or N | | | | | | | |
| What position(s) are you applying fo | or? | | | | | | | |
| If applying for Delivery Driver, have | you been involved in a movi | ng vehicle viola | tion in the last 7 years? | | | | | |
| \mathbf{Y} or \mathbf{N} (Gables Bagels will check the motor driving is an essential job function) If yes, \mathbf{y} | | · · | | | | | | |
| What skills do you have that are app | olicable to position(s) applied | d for? | | | | | | |
| | | | | | | | | |
| Date available for employment: | | | | | | | | |
| If hired, how long do you plan to be | employed by Gables Bagels | ? | | | | | | |
| How many hours are you able to wo | rk per week? | (Gables Bagels is c | pen for business 7 days a week | | | | | |



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| ork? | Y or N | - | neduled or inter If yes, please | | _ | | ay affect your | | |
|--------------------------------------|------------|-----------------------------|------------------------------------|------------|----------|--------------------------|--------------------------|---|--|
| oecify hours a | availabl | e each | day of the wee | k: | | | | | |
| Monday | Tues | sday | Wednesda y | Thurs | day | Friday | Saturda | ay Sunday | |
| | | | | | | | | | |
| Educatio | n | N | ame and Addre of School | ss | У | le last ear pleted | Did you Graduat e? | Subjects studied, Degrees received | |
| High Scho | ol | | | | 1 | 2 3 4 | Y or N | | |
| College | | | | | 1 | 2 3 4 | Y or N | | |
| Post Colle | ge | | | | 1 | 2 3 4 | Y or N | | |
| Trade, busing or corresponded school | | | | | 1 | 234 | Y or N | | |
| nployment Hi | story | | | | | | | | |
| Provide informati | ion for yo | ur last 3 | employers starting | with the m | ost rece | nt. If never e | mployed, list any | volunteer activities | |
| | | Supervisor: | | | | | | | |
| | | Dates (From: To) | | | | | | | |
| | | Phon | | | | one number: | | | |
| ast rate of pay re you eligible | | | | eason fo | r leavin | g: | | | |
| , , | | | | | | | | | |
| | | Supervisor:Dates (From: To) | | | | | | | |
| | | | | | | | | | |
| บเสนเบท: | | | R | P | none n | umber: | | | |



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| Are you eligible for rehire? Y | or N | | | | |
|--------------------------------|--|--|--|--|--|
| Employer 3: | oyer 3:Supervisor: ion held:Dates (From: To) ion:Phone number: | | | | |
| | | | | | |
| | | | | | |
| Last rate of pay: | Reason for leaving: | | | | |
| Are you eligible for rehire? Y | or N | | | | |
| Personal References | Phone number: | | | | |
| | | | | | |
| | Phone number: | | | | |
| - | Relationship: | | | | |
| | | | | | |
| Occupation: | Phone number: | | | | |