



**Employment Application** Sub Zero Ice Cream hires only US Citizens and lawfully authorized alien workers. The law prohibits discrimination because of race, color, religion, sex, age, national origin, or a disabled condition.

Location Applying for: \_\_\_\_\_  
 (Please print or type all information) Date of Application: \_\_\_\_\_ Phone: \_\_\_\_\_

**Personal**

NAME: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ARE YOU OVER EIGHTEEN YEARS OF AGE? Yes  No  IF NOT, WHAT IS YOUR AGE? \_\_\_\_\_

PERSON TO BE CONTACTED IN CASE OF EMERGENCY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

**Availability**

WHAT LED YOU TO CONTACT US FOR EMPLOYMENT? \_\_\_\_\_

DAYS AVAILABLE:

M T W R F S

HOURS AVAILABLE:

10 AM 11 12 1 2 3 4 5 6 7 8 9 10 11 PM

DATE AVAILABLE FOR EMPLOYMENT: \_\_\_\_\_ WHAT TRANSPORTATION WILL YOU USE TO GET TO WORK? \_\_\_\_\_

ARE YOU INVOLVED IN ANY ACTIVITIES THAT MAY REQUIRE TIME OFF? Please describe \_\_\_\_\_

**Miscellaneous**

HAVE YOU WORKED FOR THIS COMPANY PREVIOUSLY? Yes  No

IF YES, WHAT LOCATION? \_\_\_\_\_ DATE? \_\_\_\_\_

SUPERVISOR'S NAME \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

ARE YOU ABLE TO PERFORM ALL THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING WITH OR WITHOUT ACCOMODATIONS? Yes  No  IF NO, WHAT ACCOMODATIONS WOULD YOU NEED? \_\_\_\_\_

DO YOU CURRENTLY HAVE A FOOD SERVICE PERMIT? Yes  No

HAVE YOU EVER BEEN DENIED A DRIVER'S LICENSE OR HAD YOUR LICENSE REVOKED OR SUSPENDED? Yes  No

IF YES, EXPLAIN: \_\_\_\_\_

ARE YOU PLANNING TO GO AWAY TO SCHOOL? Yes  No  IF YES, WHEN? \_\_\_\_\_

HAVE YOU BEEN CONVICTED OF A FELONY OR RELEASED FROM PRISON WITHIN THE LAST 7 YEARS? A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT. Yes  No

IF YES, EXPLAIN IN FULL, INDICATING DATE, CHARGE, PLACE, ACTION TAKEN: (FORFEITURE OF BAIL IS CONSIDERED CONVICION)

IF HIRED, DO YOU AGREE TO ABIDE BY THE SAFETY RULES OF THE COMPANY? Yes  No

IF HIRED, CAN YOU PROVIDE PROOF OF ELIGIBILITY TO WORK IN THE U.S. PRIOR TO STARTING WORK? Yes  No

**Military**

DO YOU HAVE ANY MILITARY COMMITMENTS AT THIS TIME THAT COULD INTERFERE WITH YOUR DUTIES AS AN EMPLOYEE? Yes  No  IF YES, PLEASE DESCRIBE \_\_\_\_\_

## Education

	GRADE SCHOOL	HIGH SCHOOL	TRADE/TECHNICAL	COLLEGE
CIRCLE HIGHEST GRADE COMPLETED:	5 6 7 8	1 2 3 4	1 2 3 4	1 2 3 4

IF EDUCATION IS IN PROGRESS, GIVE NAME OF SCHOOL: \_\_\_\_\_

## Work History

In order for this application to be considered, you must account for all the time since leaving school, or the past 7 years, whichever is shorter.

1. NAME OF PRESENT EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATES OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_ HOURLY PAY: STARTING \_\_\_\_\_ ENDING \_\_\_\_\_

FULL TIME  PART TIME  SUPERVISOR'S NAME: \_\_\_\_\_

DESCRIBE YOUR DUTIES: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

2. NAME OF PREVIOUS EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATES OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_ HOURLY PAY: STARTING \_\_\_\_\_ ENDING \_\_\_\_\_

FULL TIME  PART TIME  SUPERVISOR'S NAME: \_\_\_\_\_

DESCRIBE YOUR DUTIES: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

## References

PLEASE LIST TWO REFERENCES (Not related to you)

NAME: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**Please read the following paragraph very carefully before signing this application.**

I certify that to the best of my knowledge and belief, the statements made by me in this application are correct and complete without omission of any kind whatsoever. I understand that any false information when applying for employment whether in this application or otherwise, may be cause for discharge at any time during employment regardless of when discovered. You are hereby authorized to investigate all the statements made in this application. I further understand that I do not have an employment contract and that my employment and compensation can be terminated with or without notice or cause at any time by the company or me.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

(Company use only) INTERVIEWER: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

DATE HIRED:  
FIRST DAY WORKED:

RATE OF PAY PER HOUR: \$  
RESTAURANT #:

SHIFT HIRED FOR:  
POSITION HIRED FOR: