



# Application for Employment

*\*Please submit completed applications to [hiring@candymountaincreamery.com](mailto: hiring@candymountaincreamery.com)*

Personal Data			
Name (last, first, middle)			
Street Address and/or Mailing address		City	State      Zip
Home phone	Cellular phone	Email address	
Date you can start work	Hourly wage desired	Do you have a high school diploma or GED?	
Position Information <small>Please check the boxes that apply</small>			
Hours Full-time Part-time	Mornings Afternoon / Evenings	How many shifts per week would you like to work?	
Are you authorized to work in the U.S. on an unrestricted basis? <input type="checkbox"/> Yes <input type="checkbox"/> No		If under 18, do you have a valid work permit?	
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment)			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain: _____			
Is there a specific position you are applying for (if so, please list)? _____		If you're under 18 years old, have you obtained a worker's permit? _____	
Qualifications <small>Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.</small>			
School/Training/Military Name	Dates	Degree	City/State
Special Skills <small>List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc)</small>			
References <small>Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.</small>			
Name	Address/City/State	Phone	Relationship

Work History <small>Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)</small>		
Position #1	Start Date (Mo/Day/Year)	End Date (Mo/Day/Year)
Company Name	Supervisors Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Salary	Ending Salary

May we contact your present Employer?  Yes  No  N/A

Position #2	Start Date (Mo/Day/Year)	End Date (Mo/Day/Year)
Company Name	Supervisors Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Salary	Ending Salary

Position #3	Start Date (Mo/Day/Year)	End Date (Mo/Day/Year)
Company Name	Supervisors Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Salary	Ending Salary

Position #4	Start Date (Mo/Day/Year)	End Date (Mo/Day/Year)
Company Name	Supervisors Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Salary	Ending Salary

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date