FOR OFFICE USE ONLY					
INTERVIEW DATE/TIME:	INTERVIEWER:	SCORE:			

MECONI'S ITALIAN SUBS

Employment Application



APPLICANT INFORMATION								
Last Name	First Name	First Name MI			Are yo of 18?	ou over the age	YES 🗌	NO 🗆
Street Address				Apartment/Unit #				
City	City State			ZIP				
Phone		E-mail A	ddress					
How did you hear of this opening? Do you hav			Do you have	a current fo	od hand	ller's card?	YES	NO 🗆
Have you ever worked for this company? YES \(\square\) NO \(\square\) If so, what location and when?								
Have you ever been convicted of a felo	ny? YES 🗌 N	ю 🗆	If yes, pleas	e explain.				
Describe handicaps, health problems or	injuries that should	d be consid	dered in job pl	lacement; if a	iny:			
EMPLOYMENT HISTORY (START	WITH MOST RECE	NT EMPLO	YER)					
Company				Phone	()		
Address				Supervisor				
Job Title Starting Salary			\$		Ending Sal	ary \$		
Responsibilities								
From To	Reason for L	Reason for Leaving						
May we contact your previous supervis	or for a reference?		YES 🗌	NO 🗆				
Company				Phone	()		
Address				Supervisor				
Job Title Starting Salary		\$		Ending Sal	ary \$			
Responsibilities								
From To	Reason for Lo	Reason for Leaving						
May we contact your previous supervis	or for a reference?		YES 🗌	NO 🗌				
Company		Phone	()				
Address				Supervisor				
Job Title		Starti	ing Salary	\$		Ending Sal	ary \$	
Responsibilities								
From To	Reason for L	eaving						
May we contact your previous supervisor for a reference?								

EDUCATIO	ON						
High School			Location				
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree		
College			Location				
From	То	Did you graduate?	YES 🗌	NO 🗆	Degree		
SCHEDULI	E						
Which location	on are you applying fo	or? Please circle one:	Lace	У	Olympia	Tumwat	er Hawks Prairie
When can yo	ou start?	Pleas	e Circle one:	F	ull Time	Part Time	Summer
Hours Availa	ble:						
<u>Monday</u>	<u>Tuesday</u>	Wednesda	<u></u>	nursday	<u>Friday</u>	<u>Saturd</u>	<u>Sunday</u>
						_	CLOSED
Please list any other activities or commitments that may interfere with attendance requirements:							
DISCLAIMER AND SIGNATURE							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature:						Date:	