## Employment Application Form



Crew member		Other										
Personal Details —												
Name		M.l	Last		Which	Store	_					
Address	ddressCity											
State Zip Code												
Telephone No. (home) Telephone No. (cell)												
How far do you	How far do you live from Tutti Frutti? Are you over 18 years of age? Yes ☐ No ☐ (Proof of age or work permit maybe required if hired)											
Are you legally able to work in the United States? Yes \( \square\) No \( \square\) (Proof of identity and legal authority to work in the U.S. is a condition of employment)												
		i's before? Yes □		1 3								
If 'Yes', Which store(s)?												
Date(s): From_	Date(s): From To Reasons for leaving											
How did you hear about the job?												
Contact person in case of emergency												
Name	Name Relationship											
Address	dress Telephone No. (home)											
State	te Zip Code Telephone No. (cell)											
W. J. C.L. J. L.	A 11-1-11/4-											
Work Schedule SHIFT	MON	TUES	WED	THUR	FRI	SAT	SUN					
AM	to	to	to	to	to	to	to					
PM	to	to	to	to	to	to	to					
How many hours would you wish to work each week?  Indicate when you are available to work?												
Could you work extra hours if required? Yes $\square$ No $\square$												
Are you looking for Temporary  or Full-time part time												
If temporary, when are you available? From To												
Trumporary, when are you available: 110m10												

Present and Previous	s Employment (	please include work	experience detail	's)							
Employment dates Name & add		lress of Employer Job title and		duties Reason for l		eaving					
Do you have another job? Yes □ No □											
If offered a position with Tutti Frutti's, will you continue to work for your other employer? Yes   No											
If YES, please give	details of days a	nd hours currently	y being worked?								
If you have no previous employment please give details of who to contact for a personal or educational reference											
School Information	(most recent)										
Name		Address				School Phone					
Level Completed		Major		Sports	or Activities Invol	lving	GPA				
Are you currently attending this school? Yes \( \bar{\sigma} \) No \( \bar{\sigma} \)  How many days per week do you go to the school?											
Comment In Commention											
General Information											
Have you ever been convicted of a felony which has not been annulled or sealed by a court Yes \(\begin{align*}\) No \(\begin{align*}\)											
If yes, please explain											
(convictions w	ill not necessary e	xclude you from em	nployment, but da	te and ty	pe of conviction may	y be considered for	or job placement)				
Declaration											
I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at that time. I understand that before any offer of employment is made, I must provide the company with confirmation eligibility to work in the United States.  I certify that the information on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient											
cause for rejection or, if employed, dismissal.											
Applicants Signature	е			Date							