

Employment History

Please start with your most recent place of employment

Employer _____	Telephone Number () _____ - _____
Address _____	City: _____ Zip: _____
From _____/_____ To _____/_____	Supervisor's Name _____
Starting Salary \$ _____ per hour	Ending Salary \$ _____ per hour
Describe duties	Reason for Leaving
	May we contact your present employer at this time? Yes No

Employer _____	Telephone Number () _____ - _____
Address _____	City: _____ Zip: _____
From _____/_____ To _____/_____	Supervisor's Name _____
Starting Salary \$ _____ per hour	Ending Salary \$ _____ per hour
Describe duties	Reason for Leaving

Employer _____	Telephone Number () _____ - _____
Address _____	City: _____ Zip: _____
From _____/_____ To _____/_____	Supervisor's Name _____
Starting Salary \$ _____ per hour	Ending Salary \$ _____ per hour
Describe duties	Reason for Leaving

Indicate relevant job-related qualifications or skills:

Personal Interests

Why do you want to work for the Coffee Society?

Do you have any friends or relatives who work or have worked at the Coffee Society? Yes No

Who?

When?

Where?

What are your interests?

What are your goals?

How long do you plan to work at the Coffee Society?

Regarding your most recent employer:
What did you like most about your boss?

What did you like least?

What do you think should be the goals/mission of the Coffee Society?

What do you think you could contribute to the Coffee Society to achieve these goals?

I certify that everything I have stated above is true to the best of my knowledge. I also understand that if I am hired, I will be required to show proof of identity and legal work authorization. I agree that, just as I have, if hired, the right to terminate my employment at any time, with or without cause and with or without notice, the company may terminate my employment at any time, with or without cause or notice.

Signature of Applicant _____

Date _____

Coffee Society is an equal opportunity employer and will not discriminate on the basis of race, color, religious creed, national origin, ancestry, age, sex, disability, marital status, military status, military service, pregnancy, childbirth or related medical condition, or on any other basis prohibited by applicable federal, state or local laws or ordinances.

APPLICATION IDENTIFICATION RECORD

The information requested on this form is required by the regulations of the California Department of Fair Employment and Housing and the Equal Employment Opportunity Commission. We are required to keep these records on file for two years, and will detach this form from your application. This information will NOT be used for evaluation of your application. The information is for record keeping purposes only, and is *voluntary* on your part.

Date:
Position Applied for:
Male () Female ()
Age:
Handicapped? Yes No
Race (Circle one): 1. White 2. Black 3. Hispanic 4. Asian or Pacific Islander 5. American Indian or Alaskan Native 6. Other