

APPLICATION FOR EMPLOYMENT

At Dippin' Dots Ice Cream

Location (s) : _____

Name of Job Applicant

Date

NOTICES TO JOB APPLICANT

EQUAL OPPORTUNITY. It is the policy of the Company, ICE, LLC dba Dippin' Dots to make all employment decisions without regard or consideration for any individual's race; religious creed; color; national origin; ancestry; physical disability (including HIV and AIDS); mental disability; medical condition (meaning cancer or genetically-related disease or disorder); marital status; sex (gender); sexual orientation; gender identity; age (meaning over 40); or pregnancy, childbirth, related medical conditions, or any other factor protected from discrimination by federal, state or local laws. Except if there is a bona fide occupational qualification or a business necessity that is reasonably necessary to secure the safe and efficient operation of the business, equal employment opportunity will be extended to all persons in all aspects of the employer-employee relationship, including recruitment, hiring, upgrading, training, promotion, transfer, discipline, layoff, recall, and termination. The Company does not tolerate any illegal discrimination or harassment, whether verbal, physical or visual. If you believe that you have been treated unfairly or harassed in anyway during this employment application process, please contact the Owner at ddotsaz@yahoo.com immediately. The Company prohibits retaliation by anyone against those who make a report of suspected unfair treatment or harassment. If you need a reasonable accommodation in order to complete this application or in any step of the interview process, please inform the Owner.

AT-WILL EMPLOYMENT. Employment at the Company is at the will of the Company and the employee. An employee can quit at any time for any reason, with or without notice. The Company can dismiss an employee at any time for any reason, with or without notice. Only the President of the Company can enter into employment contracts on behalf of the Company that modify this "at will" relationship. Any employment contract must be in writing.

Driver's License and DMV PRINT OUTS. If the job being applied for requires the driving of a vehicle on public roads, then all job offers are conditional upon the applicant showing a valid Arizona driver's license and providing a DMV printout showing authorization to drive and the ability to be insured by the Company's insurance at standard rates.

RIGHT TO WORK IN U.S. All job offers are conditional upon the job applicant providing proper proof of his or her right to work in the United States, and, if applicable, right to work as a minor.

HANDBOOK. All employees are subject to the policies contained in the employee handbook. All job applicants may review a copy of the handbook if they ask to do so. The handbook is property of the Company and applicants may not take the handbook off Company premises.

MISREPRESENTATIONS. The Company is relying on the information that you provide on this Application, in the documents you provide to the Company, and during any interview(s). You must complete the application fully to be considered for a job. If you knowingly make any misrepresentation or omission, your application and any job offers may be withdrawn; and, if the falsehood is not discovered until after you are employed, then your employment may be terminated for lack of honesty at any time after your employment begins.

STALE APPLICATIONS. This Application is only current for 60 days. If you are not hired within 60 days, a new application will have to be completed in order to be considered for employment after 60 days.

APPLICANT'S SIGNATURE

I hereby state that the information provided by me in this application is true and accurate. I also state that I am fully qualified and able to perform the job being applied for, except as I have written below. I also state that I have read and understand the Company policies contained in this application.

Sign: _____

Date: _____

When Complete SUBMIT BY:

**EMAIL (scan) to: ddotsaz@yahoo.com
or DROP OFF at Location**

(Please Print)

First Name		Middle Name		Last Name		
Street Address			City		State	Zip
Mailing Address (if different from above)			City		State	Zip
List other names used in past:						
Home Phone:		Work Phone:		Cell Phone:		
List the position are you applying for:						
Can you provide proof of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, can you provide proof of your legal authorization (work permit) to work as a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Have you ever been convicted by any court of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Have you ever received a Dishonorable Discharge from the armed services? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Are you currently out on bail or on your own recognizance pending a trial? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<i>You need not list minor traffic violations for which the fine was \$500 or less or any offense that does not have to be disclosed to the potential employers by law, such as a misdemeanor marijuana offense over two years old or sealed or expunged criminal files. If your answer is yes, list all offenses on the back of the application giving date, location, nature, and disposition for each. A conviction will not necessarily disqualify you from a job.</i>						
If you are applying for a position that requires you to drive a vehicle on public roads, has your driver's license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<i>If your answer is yes, list all offenses on the back of the application giving date, location, nature, and disposition for each. You need not list offenses that are sealed or expunged. A suspension or revocation will not necessarily disqualify you from a job.</i>						
Have you ever worked here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list dates? _____						
Date first available for work:				Asking wage:		
How did you learn about us? <input type="checkbox"/> Ad <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Referred by _____						

Employment Experience -- List your present or last job and go backwards. If you need additional space, please continue on a separate sheet of paper. You may attach a resume, but the following still needs to be completed.

Employer Name:				
Address:		City:	State:	Zip:
Telephone Number:				
Dates Employed:	Starting:	Ending:		
Wage Rate:	Starting:	Ending:		
Job Title:		Supervisor's Name:		
Job Duties:				
Describe any specialized training, apprenticeship, or skills you received at this job:				
Reason for Leaving:				

Employer Name:		
Address:	City:	State: Zip:
Telephone Number:		
Dates Employed:	Starting:	Ending:
Wage Rate:	Starting:	Ending:
Job Title:	Supervisor's Name:	
Job Duties:		
Describe any specialized training, apprenticeship, or skills you received at this job:		
Reason for Leaving:		

Explanation of Gaps in Employment – Please explain why you were not employed if there are gaps in your employment history. (Use back of sheet if necessary)

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Explanations of Terminations – If you ever had your employment terminated or if you ever quit in lieu of being terminated, please explain. (Use back of sheet if necessary)

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Education – List your education, starting with high school. Start with the last school you attended if you did not graduate from high school.

Name of School:	Last Grade Completed:
Type of School: <input type="checkbox"/> Elementary <input type="checkbox"/> Jr High <input type="checkbox"/> High School <input type="checkbox"/> Trade <input type="checkbox"/> College <input type="checkbox"/> Post-Graduate	
Location of School:	
Diploma / Degree Earned: <input type="checkbox"/> General <input type="checkbox"/> GED <input type="checkbox"/> Other (describe):	
Describe Course Of Study:	
*Describe any specialized training, skill building, or apprenticeship activities you engaged in:	
*Describe any honors you have received:	

Name of School:	Last Grade Completed:
Type of School: <input type="checkbox"/> Elementary <input type="checkbox"/> Jr High <input type="checkbox"/> High School <input type="checkbox"/> Trade <input type="checkbox"/> College <input type="checkbox"/> Post-Graduate	
Location of School:	
Diploma / Degree Earned: <input type="checkbox"/> General <input type="checkbox"/> GED <input type="checkbox"/> Other (describe):	
Describe Course Of Study:	
*Describe any specialized training, skill building, or apprenticeship activities you engaged in:	
*Describe any honors you have received:	

**You do not have to include any information that may indicate your race, color, gender, national origin, disability, or other legally protected status.*

Special Skills and Qualifications – Provide any additional information, such as special skills and qualifications not already mentioned, that you feel may be helpful in considering your application. (Use back of sheet if necessary)

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Job Limitations – If a job description is attached, please list any essential functions of the job that you cannot perform, or that you cannot perform without direct threat of injury to yourself or others. Also provide suggestions of any accommodations that may allow you to perform those essential functions. (Use

back of sheet if necessary)

Schedule Availability

- Full Time – I am available and desire to work full-time (35-40 hours).
- Part Time – I am available and desire to work part-time (less than 35 hours).

List work schedule days/times you are unavailable to work:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
I am <u>NOT</u> Available:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:	<input type="checkbox"/> All Day From: To:
Comments:							

NOTE: Work schedules are subject to change, and overtime may be required. No one is hired for any guaranteed number of hours or work times.

References – Please provide three references that can provide information about your work skills and work habits. Please do not list relatives.

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

**Separate Authorization for Release of Information
and Waiver of Potential Claims**

To Whom It May Concern:

I am applying for a job at Dippin' Dots located at _____ (location)

I hereby authorize the Company to contact the references, past employers, schools, and training institutions listed in the Employment Application (and my resume) or any other person or entity that may have information about my (1) prior employment, or (2) educational experiences, or (3) statements contained in this Application.

I hereby authorize any references, past employers, schools, and training institutions listed in my Employment Application (and my resume) to release to the Company all information about my (1) prior employment, or (2) educational experiences, or (3) statements contained in the Employment Application (and my resume). I hereby waive any potential claim that I may have against any references, past employers, schools, and training institutions listed in my Employment Application (and my resume), and their employees, officers, and directors, for providing information about me to the Company.

I hereby agree to waive any claim that I may have against the Company and to defend and hold the Company harmless from any and all claims that may arise from the Company contacting any person or entity described in this release.

A copy or facsimile of this Authorization may be treated and relied upon as if it were an original.

Applicant's Signature

Date