



## Employment Application

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last / First / Middle)

Address: \_\_\_\_\_  
(No. Street / City / State / Zip)

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you 18 years of age or older?  Yes  No

If hired, can you provide written evidence that you are authorized to work in the U.S.?  Yes  No

### EDUCATION

Type	Name/Location	Course of Study	# Years Completed	Degree/Diploma
Elementary & Jr. High	_____	_____	_____	_____
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Technical or Other	_____	_____	_____	_____

### EMPLOYMENT RECORD

Company Name and Address	Kind of Work	Date: Started/Left	Rate of Pay	Reason for Leaving
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____



**EMPLOYMENT REFERENCES (Do Not Include Relatives)**

Name/Occupation/Relationship/Years/Contact info

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**EMPLOYMENT**

Type of Work Desired \_\_\_\_\_ Salary Desired \_\_\_\_\_

Are you looking for full time or part time work?  FT  PT How many hours per week? \_\_\_\_\_

**Which shifts are you available to work? (Check all that apply.)**

- Monday  12-5pm  5-11pm
- Tuesday  12-5pm  5-11pm
- Wednesday  12-5pm  5-11pm
- Thursday  12-5pm  5-11pm
- Friday  12-5pm  2-10pm  5pm-12am
- Saturday  12-5pm  2-10pm  5pm-12am
- Sunday  12-5pm  5-11pm

How Were You Referred To Our Organization? \_\_\_\_\_

Please list any additional information that relates to your ability to perform the job for which you have applied such as licenses, professional memberships, hobbies, etc.

\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT'S STATEMENT**

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by a Partner of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Splendoras Gelato, 317 East Main Street, Charlottesville, VA 22902