

We are an Equal Opportunity Employer and committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

 &J JAM'SOUL	
Employment Application	Position applying for

PERSONAL DATA												
Name (last, first, middle)												
Street Address and/or Ma	ailing Address		City						State	Zip		
Home Telephone Number	•		E-Mail Co				Cellular Tel	Cellular Telephone Number				
Date you can start work			Desired Pay				Do you have a High School Diploma or GED? Yes No					
POSITION INFORMATION Check all that you are willing to work												
Hours: Full-Time Part-Time		Days Eveni	Weekends ☐ ings ☐ As needed ☐				Status: Regular 🔲 Temporary 🗆					
Are you legally eligible	to work in the	US?						Yes	s 🗆	No		
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for Yes No employment.) If yes, explain:												
If selected for employment are you willing to submit to a background check? Yes □ No □ No □ No □ Do you have current ServSafe Certification? Yes □ No □												
Can you perform these essential functions of the job with or without reasonable accommodation? Yes No												
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as degrees, vocational or technical programs, and military training.												
		School Name Degree						Address/City/State				
School												
School												
Other												
SELECT THE SHIFTS YOU ARE AVAILABLE TO WORK:												
Mon AM	Tue	AM	Wed AM	1	Thurs AM		Fri AM		Sat AM		Sun AM	
Mon PM	Tue	PM	Wed PM	7	Thurs PM	Fri PM			Sat PM		Sun PM	
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have professional references, then list personal, unrelated references.												
Name		Address/City/State Phone						F	Relationship			

WORK HISTORY Start with your present or most recent employed	oyment and work	back. Use separate sheet if necess	sary. (INCLUDE PAID AND UNPAID POSITIONS)					
Job Title #1	Start Date (mo	o/day/yr)	End Date (mo/day/yr)					
Company Name	Supervisor's N	lame	Phone Number					
City	State		Zip					
Duties:								
		T	T					
Reason for Leaving		Starting Pay	Ending Pay					
May we contact your present employer?	Yes 🗌	No 🗌 N/A 🗌						
Job Title #2	Start Date (mo	o/day/yr)	End Date (mo/day/yr)					
Company Name	Supervisor's N	lame	Phone Number					
City	State		Zip					
Duties:	•							
Reason for Leaving		Starting Pay	Ending Pay					
Job Title #3	Start Date (mo	o/day/yr)	End Date (mo/day/yr)					
Company Name	Supervisor's N	lame	Phone Number					
City	State		Zip					
Duties:								
Reason for Leaving		Starting Pay	Ending Pay					
	,							
Job Title #4	Start Date (mo	o/day/yr)	End Date (mo/day/yr)					
Company Name	Supervisor's N	lame	Phone Number					
City	State		Zip					
Duties:								
		T	T					
Reason for Leaving		Starting Pay	Ending Pay					
I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.								
I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.								

Date

Applicant Signature