Spad's Twisters Soft-Serve Ice Cream

14// 110//							
WHICH LOCATION	:						
	*** Return application in person. DO NOT MAIL.						
Application For Employment							
PERSONAL INFORI	MATION		, 1110110				
Name							
LAST	FIRST	MIDDLE	_ Email				
Address							
		CITY	STATE	ZIP CODE			
Home Phone #	Cell Phone #	Date of B	irth				
EMPLOYMENT DES	IRED						
Position	Date You Can Start		Salary De	esired			
	ow? If so, may v						
	ed to this company before?						
Treferred by							
EDUCATION	Name & Location of School	# of Years Atten	ded	Did You Graduate?			
Grammer School				+			
High School							
College							
GPA	High School:	College:					
GENERAL							
Are there any times th	at you must have several days off?	If yes, please list date	es				
Special Skills							

If yes, please provide date(s) and details _____

Month &	EMPLOYERS (List below last three	employers, starting	with last one first)		
Year	Name & Address of Employer	Salary	Position	Reason for Leaving	
From			T GOLDON	Treason for Leaving	
То					
From					
То					
From					
Го					
Which of th	nese jobs did you like best?				
	ou like most about these jobs				
O	ne following times will you normally be Afternoons after school School Nights		(check all that apply)? O Weekend Days O Weekend Nights		
	available to work (check all that app	oly)?	O Mothers Day		
O Spring Break			O Father's Day		
	Memorial Day Weekend Graduation		O July 4th Weekend O Labor Day Weekend		
emanding, ave to be v ou can har 'ou don't ha	an ice cream store looks fun from the it gets hot, there's a lot of pressure, willing to pick up trash, clean up aftendle it? On a separate sheet of pape ave to write a long essayjust a few your name is on it and please attach If you don't write anything, you he	you have to work we ryourself, clean ute, r, tell us why you thi sentences to tell us it to your application	when other kids are out nsils, bathrooms, floors ink you would like to wo s why you feel you'll en n.	having fun, and you s, etc. Do you think ork at Twisters. joy being on our team.	
case of a					
mergency i					
	Name	Address		Phone No.	
missions, or m rminated at ar at my employr y or the compa th or without c esident, and th	information submitted by me on this application is representations are discovered, my application of time. In consideration of my employment, I ment and compensation can be terminated, wi any's option. I also understand and agree that ause, and with or without notice, at any time. Then only when in writing and signed by the prespection of time, or to make any agreement contributions.	on may be rejected and if agree to conform to the common to the common the company may chang I understand that no company authority to the common that the com	I am employed, my employn ompany's rules and regulation ith or without notice, at any till e the terms and conditions of pany representative, other that	nent may be ns, and I agree me, at either my employment, an its	
ate	Signature	39.			