|  |  |
| --- | --- |
| Jelli’s Market  Employment Application | C:\Users\Lebligail\Pictures\logo.jpg |

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | |  | | | | | | | First | |  | | | | | | | | | | | M.I. | | | Date |  | |
| Street Address | | | | | |  | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | |  | |
| City |  | | | | | | | | | | | State | |  | | | | | | | | | | | ZIP | |  | | | |
| Phone |  | | | | | | | | | | | E-mail Address | | | | | |  | | | | | | | | | | | | |
| Date Available | | | | | |  | | | | | | |  |  | | | Scheduled vacations? List dates | | | | | | | | | | |  | | |
| Position Applied for | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Have you ever worked for this company? | | | | | | | | | YES | NO | | | | If so, when? | | | | |  | | | | | | | | | | | |
|  | | | | | | | | |  |  | | | |  | | | | |  | | | | | | | | | | | |
| References | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list ONE professional reference. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | Phone | | | | | | |  | | | | | | | |
| Address | | | | |  | | | | | | | | | | |  | | | |  | | | | | | | | | | |
| Relationship | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Employment: If no work history Please write “none” below | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | | | | | Phone | | | | | |  | | | | | | | | |
| Address | |  | | | | | | | | | | | | | Supervisor | | | | | | |  | | | | | | | |
| Job Title | |  | | | | | | | | |
| Responsibilities | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Disclaimer and Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview  may result in my release. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | |  | | | | | | | | | | | | | | | | | | | | Date | |  | | | |

Office Use Only: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_