

TIPSY COW ICE CREAM

Employment Application

Applicant Information

Full Name: _____ DOB: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Cell Phone: _____

Mark all days/shifts you are available to work:

	Afternoons	Evenings
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Do you currently have a food handlers certification? YES NO If yes, expiration day? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____

From: _____ To: _____ Did you graduate? YES NO

College: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

