

SWEET KIWI EMPLOYMENT APPLICATION FORM

Personal Details

First Name _____ M _____ Last Name _____

Date of Birth _____ Social Security Number _____

Address _____ City _____ State _____ Zip Code _____

Phone (h) _____ Phone (c) _____ email _____

Have you worked for Sweet Kiwi before? Yes ___ No ___

If 'Yes', Which store(s)? _____

Date(s): From _____ To _____ Reasons for Leaving _____

Have you ever been convicted of a felony which has not been annulled or sealed by a court? Yes ___ No ___

If 'Yes', please explain _____

(convictions will not necessary exclude you from employment, but date and type of conviction maybe considered for job placement)

Contact person in case of emergency

Name _____ Relationship _____

Address _____ Phone (h) _____

State _____ Zip Code _____ Phone (c) _____

Work Schedule Availability

SHIFT	MON	TUES	WED	THUR	FRI	SAT	SUN
AM	To	To	To	To	To	To	To
PM	To	To	To	To	To	To	To

How many hours would you wish to work each week? _____ Indicate when you are available to work? _____

Could you work extra hours if required? Yes ___ No ___

Present and Previous Employment *(please include work experience details)*

Employment Date	Name & Address of Employer	Job Title and Duty	Reason For Leaving

Do you have another job? Yes ___ No ___

If offered a position with Sweet Kiwi, will you continue to work for your other employer? Yes ___ No ___

If YES, please give details of days and hours currently being worked? _____

If you have no previous employment please give details of whom to contact for a personal or education reference

School Information (most recent)

Name		Address		School Phone	
Level Completed	Major		Sports or Activities Involving		GPA
Are you currently attending this school? Yes ___ No ___			How many days per week do you go to the school? ___		

Declaration

I authorize investigation of all statements contained in this application for employment as maybe necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at that time. I understand that before any offer of employment is made, I must provide the company with confirmation eligibility to work in the United States.

I certify that the information on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal.

Applicant Signature

Date

Signature of Parent, Guardian, or Custodian
(If Applicant is under 17 years old)

Name of Parent, Guardian, or Custodian
(If Applicant is under 17 years old)

Date