Employment Application Form



Crew member	ember Other E-mail						_					
Personal Details —												
Name		M.1	I Last	t	Which	Store	_					
Address	ddressCity											
State	State Zip Code											
Telephone No. (home) Telephone No. (cell)												
How far do you live from Tutti Frutti? Are you over 18 years of age? Yes No (Proof of age or week promite more to be be required if bired)												
(Proof of age or work permit maybe required if hired) Are you legally able to work in the United States? Yes No (Proof of identity and legal authority to work in the U.S. is a condition of employment)												
Have you worked for Tutti Frutti's before? Yes \(\sigma\) No \(\sigma\)												
Date(s): From To Reasons for leaving												
How did you hear about the job?												
Contact person in case of emergency												
Name	Name Relationship											
Address	dress Telephone No. (home)											
State	tate Zip Code Telephone No. (cell)											
W. J. C.L. J. L.	A 11-1-11/4											
Work Schedule 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 \square No \square												
Are you looking for Temporary or Full-time part time												
If temporary, when are you available? From To												
Tremporary, when are you available: 110m10												

Present and Previous	s Employment (please include work	experience detail	(s)						
Employment dates Name & add		ress of Employer	Job title and duties		Reason for l	leaving				
Do you have another job? Yes □ No □										
If offered a position with Tutti Frutti's, will you continue to work for your other employer? Yes No										
If YES, please give of	details of days a	nd hours currently	y being worked?	·						
If you have no previous employment please give details of who to contact for a personal or educational reference										
School Information	(most recent)									
Name		Address				School Phone				
Level Completed		Major		Sports	or Activities Invol	lving	GPA			
Are you currently attending this school? Yes \(\bar{\cup} \) No \(\bar{\cup} \) How many days per week do you go to the school?										
General Information										
Have you ever been	convicted of a f	elony which has r	not been annulle	d or seal	led by a court Yes	□ No □				
If yes, please explain										
(convictions will not necessary exclude you from employment, but date and type of conviction may be considered for job placement)										
Declaration										
I authorize investigation of all statements contained in this application for employment as may be 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.										
Applicants Signature	2		Date							