

Employment Application Campbells Frozen Custard



4125 Merchant Plaza, Woodbridge VA 22192
PH: 571-285-1711

DATE: _____

FULL NAME:

ADDRESS:

(including town)

PHONE:

(Cell)

EMAIL:

Are you a U.S. Citizen or do you have an entry permit
which allows you to work in the United States?

YES ____ NO ____

EDUCATION:

SCHOOL NAME (include all if more than 1 attended)

No. of years attended?

Did you graduate?

PREVIOUS WORK EXPERIENCE:

NAME & ADDRESS OF COMPANY & TYPE OF BUSINESS	FROM	TO	DESCRIBE THE WORK YOU DID	LAST WAGE	REASON FOR LEAVING	NAME OF SUPERVISOR

Campbells Frozen Custard Employment Application - continued



Store preference (Lake Ridge/Stonebridge) _____

Please list any days or nights you would not be able to work due to other commitments.
Weekend shifts are mandatory, as those are our busiest days:

Do you participate in any school sports/activities? _____

Do you have any planned vacations coming up? If so, when? _____

Are you under 16 years of age? Yes _____ No _____

How will you get to work? _____

Hobbies/Talents _____

What's the most important thing to you about customer service? _____

1. I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.
2. I understand that false statements on this application may be cause for dismissal without notice.
3. I agree that all former employers may furnish Campbells Frozen Custard with information regarding record of my service, character, and reason for leaving. I release all former employers from all liability for providing such information.

DATE: _____ SIGNATURE OF APPLICANT: _____