



Application for Employment

Pre-Employment Questionnaire
Equal Opportunity Employer

Name: _____ Soc. Security # _____

Address: _____ City: _____

Township you live in: _____

Date of Birth: _____ Age: _____ E-Mail: _____

State: PA Zip: _____ Phone: _____

Cell: _____ Emergency Phone
Number: _____

Referred by: _____

Date you can start: _____ Salary Desired: _____

Currently Employed? Yes () No (x)

Education History:

High School: _____ Years: _____ Graduate? _____

Are you planning to attend college? Yes _____ No _____

If planning to attend college, are you planning to attend a local college?

Yes _____

No _____

If answered yes, will you be able and willing to work around your college schedule?

_____ Yes

_____ No

College: _____ Years: _____ Graduate? _____

Other: _____ Years: _____

Military Service: _____ Years: _____ Rank: _____

MUST BE AVAILABLE TO WORK ON SUNDAY'S, WEEKENDS, & HOLIDAYS TO BE CONSIDERED FOR EMPLOYMENT

Please initial you read the above statement and agree to those terms.

_____ initials

Former Employers

Date:	Name of Employer	Position	Reason for Leaving

May we contact any old employers? (please check one) _____ yes _____ No
If no, please explain why.

Do you have transportation to and from work? (please check one)

_____ Yes _____ No

What has made you decide to apply here for a position?

No facial jewelry of any kind or visible tatoo's are permitted.

Please initial and date here that you read and understand the above statement.

(initials)

(date)

If you are in college, will you be living in the area for the summer months?

Yes _____

No _____

Please list any extra curricular activities you are involved in throughout the school year, and what time of year and months they are in. If you are involved in none, please write "none" below.

- 1.**
- 2.**
- 3.**

Will you be willing to work a work schedule around your sport while your sport or extra curricular activity is going on? _____ yes _____ no

We are open at 11am and close at 9pm in the fall/winter, and spring, daily. We open at 11am and close at 10:00pm in summer, daily. Must be available to work during all those hours seven days a week. We will work around sports.

Please initial you read and understand the above statement _____

Do you understand we are a seasonal business and hours will fluctuate different times of the year?

_____ Yes No _____

2 weeks off are permitted for each employee from July to August
June is a request only month off for seniors in high school . Some weeks may already be taken where I can't promise I can give you off.

4th of July; Mother's Day; Father's Day; Valentine's Day; Memorial and Labor Day, Easter, and any other holiday we are open are no request off day.

Initial here you understand the above statement _____

Adult References (21 years or older) (Must not be a relative)

Name & phone Number:	How do you know this person?	Years Known

In a situation where a customer could get upset about something made incorrectly or they are just in a plain bad mood that day, and they get upset with you or say something crude, please briefly state how you would handle a situation like that.

Authorization:

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the Meadows from all liability for any damages that may result from utilization of such information.

This waiver does not permit the release of use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and any other relevant federal and state laws.”

Date: _____ Signature: _____

Interview Date: _____

Remarks:

Date of Hire: _____

Date of 30 day review: _____