



**AT WILL/ SEASONAL JOB APPLICATION FORM**

**PERSONAL INFORMATION:**

**First Name** \_\_\_\_\_ **Middle Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_ **Nickname:** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_, **State** \_\_\_\_\_, **Zip** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Cell Phone Number** \_\_\_\_\_ **E-mail address** \_\_\_\_\_  
( ) \_\_\_\_\_ ( ) \_\_\_\_\_ \_\_\_\_\_

**Are you eligible to work in the United States?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Have you been convicted of or pleaded no contest to a felony within the last five years?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, please explain:** \_\_\_\_\_

**Do you have any health related issues that would prevent you from working in Food Service?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Will you be at least 15 yrs of age by May 25, 2014:** Yes / No (circle one)

**Will you be at least 18 yrs of age by May 25, 2014:** Yes / No (circle one)

**POSITION/AVAILABILITY:**

**Position Applied For**

\_\_\_\_\_

**What Days/Hours are you NOT available during the baseball season?**

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Have you worked for the Duluth Huskies before? Yes \_\_\_\_\_ No \_\_\_\_\_**

**Who were you referred by? \_\_\_\_\_**

**EDUCATION:**

**Name and Address of School - Degree/Diploma - Graduation Date**

\_\_\_\_\_

**Skills and Qualifications: Licenses, Skills, Training, Awards**

\_\_\_\_\_

**EMPLOYMENT HISTORY:**

**Present Or Last Position:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

=====

**Previous Position:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**May We Contact Your Present Employer?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**References:**

**Name/Title Address Phone**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that information contained in this application is true and complete.

I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature \_\_\_\_\_

Date \_\_\_\_\_