

Lititz Family Cupboard - Restaurant & Buffet

APPLICATION FOR EMPLOYMENT										PRE-EMPLOYMENT QUESTIONNAIRE		
PERSONAL INFORMATION (please print)												
Name		Last		First		Middle		Social Security Number			Date (D/M/Y)	
Other names you are known by _____ Are you less than 18 years of age? Yes ___ No ___												
Are you legally eligible for employment in the U.S.? Yes ___ No ___						Have you been convicted of a crime in the last seven years? Yes ___ No ___						
Present Address			Street			City			State		Zip	
Permanent Address			Street			City			State		zip	
Phone Number		Daytime		Evening		Referred By						
Are you presently employed? Yes ___ No ___ If yes, may we contact employer? Yes ___ No ___												
EMPLOYMENT DESIRED Have you ever applied to or worked for the Lititz Family Cupboard before? Yes ___ No ___ If yes, when? _____												
Position 1:			Position 2:			Salary Desired:			Location:		Date you can start:	
Specify hours available for each day of the week			Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
(please keep in mind that the availability of hours may vary)												
EDUCATION		Name, City and State of School				Circle years completed		Did you graduate?		Subjects studied and degrees received		
High School						1 2 3 4		Y N				
College						1 2 3 4		Y N				
Post College						1 2 3 4		Y N				
Trade, Business or Correspondence School						1 2 3 4		Y N				
FORMER EMPLOYERS list below current and last three employers, starting with most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying. No need to complete if a you attach a resume.												
Date D/M/Y												
From	Current Employer (name, city, state and type of business)						Salary or Hourly Starting _____ Ending _____ Average # of hours per week _____		Position		Reason for Leaving	
To												
Duties performed												
Supervisor's Name						Phone Number			May we contact?			
From	Previous Employer (name, city, state and type of business)						Salary or Hourly Starting _____ Ending _____ Average # of hours per week _____		Position		Reason for Leaving	
To												
Duties performed												
Supervisor's Name						Phone Number			May we contact?			
From	Previous Employer (name, city, state and type of business)						Salary or Hourly Starting _____ Ending _____ Average # of hours per week _____		Position		Reason for Leaving	
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Duties performed												
Supervisor's Name						Phone Number			May we contact?			
From	Previous Employer (name, city, state and type of business)						Salary or Hourly Starting _____ Ending _____ Average # of hours per week _____		Position		Reason for Leaving	
To												
Duties performed												
Supervisor's Name						Phone Number			May we contact?			

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References					
Give below the names of three professional references, whom you have known for at least one year.					
Name	City and State	Phone Number	Business	How do you know this person?	Years acquainted
1					
2					
3					



Authorization- "I certify that the facts contained in the 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 statement contained herein and the references and employers listed above to give you an and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

I agree to always do my best to uphold and work towards Lititz Family Cupboard goals.

Date	Signature								
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DO NOT WRITE BELOW THIS LINE - FOR INTERVIEWERS USE ONLY

Start Date:	Start Position:
Start Wage:	Release Date:
Comment:	

JOB EXPERIENCE	MOTIVATION
<input type="checkbox"/> Applicant has excellent experience and background	<input type="checkbox"/> Excellent motivation; strong desire to work, keeps very informed
<input type="checkbox"/> Strong experience and background	<input type="checkbox"/> Very interested in job and makes inquiries
<input type="checkbox"/> Acceptable experience and background	<input type="checkbox"/> Desire to work
<input type="checkbox"/> Background somewhat pertinent	<input type="checkbox"/> Little interest in position
<input type="checkbox"/> Background not pertinent	<input type="checkbox"/> Not interested in position; impassive
PERSONALITY TRAITS	COMPOSURE
<input type="checkbox"/> Excellent for this position	<input type="checkbox"/> Has exceptional ability to control, thrives under pressure
<input type="checkbox"/> Very good for this position	<input type="checkbox"/> Sure of him/herself to handle problems well
<input type="checkbox"/> Satisfactory for this position	<input type="checkbox"/> Average composure
<input type="checkbox"/> Doubtful for this position	<input type="checkbox"/> Seems overexerted; bothered
<input type="checkbox"/> Unsatisfactory for this position	<input type="checkbox"/> Uneasy; shows concern
APPEARANCE	OVERALL
<input type="checkbox"/> Neat and very well groomed	<input type="checkbox"/> Excellent
<input type="checkbox"/> Above average personal appearance	<input type="checkbox"/> Above Average
<input type="checkbox"/> Average personal experience	<input type="checkbox"/> Average
<input type="checkbox"/> Neglected personal appearance	<input type="checkbox"/> Below Satisfactory

APPLICANT IS: Highly Recommended Likely Candidate Likely for Another Position Very Unlikely Other