

Caffe Yolly Employment Application Form

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

DATE _____

Name _____
Last
First
Middle

Present address _____
Number
Street
City
State
Zip

Cell Phone (____) _____ Email Address: _____

Position applied for _____ Days/hours available to work
 Wage desired _____ No Pref _____ Thur _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY TEMPORARY/CONTRACT

When are you available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College/Other				

List any skills you have that are appropriate for the position you are applying for:

Explain why you believe you are qualified for the position:

What is your favorite coffee or coffee drink? _____

How would you describe yourself?

Have you ever been convicted of a crime? No Yes
 (A Conviction record will not necessarily disqualify you from employment.)

Employee Referral? Name _____

Work Experience	List your work experience for the beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		

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Reason for leaving (be specific)

PLEASE READ CAREFULLY

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

Applicant Signature

***Sign and return this to any team member at Caffe Yolly in person.**