

StonePepper's Employment Application

Last Name	First Name	M I	Date
Address			
City	State	Zip	
Social Security Number	Home Phone # with area code	Cell Phone # with area code	
Person to Notify in Case of Emergency		Phone Number	

Please Answer the Following Questions:

1. Have you ever been convicted of a felony charge? (Convictions may not disqualify you) Yes _____ No _____

If Yes, please explain: _____

2. Are you of legal age to serve alcohol in this state? (18 or older) Yes _____ No _____

3. Have you ever been fired for cause from any previous position? Yes _____ No _____

If Yes, please explain: _____

4. What position are you applying for: _____

5. When would you be able to start: _____

6. Who referred you to StonePepper's: _____

7. Employment status preferred: Full Time _____ Part Time _____ Seasonal _____

8. How long do you intend to keep this job: _____ Undecided _____

9. Have you ever been involved in community service or volunteer programs, sports in high school or college, student government, school extra-curricular activities, or social or civic group activities? If so, please explain _____

10. Are there any days or shifts you cannot work? _____

11. Please list the days and hours you are able to work. If you can work any hours - day or evening write in "ALL"

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY

EDUCATION

	<u>Name of School</u>	<u>Location</u>	<u>Special Training/Major</u>	<u>Last Year Completed</u>	<u>Diploma Y/N</u>
High School	_____	_____	_____	9 10 11 12	_____
College	_____	_____	_____	1 2 3 4	_____
Trade School	_____	_____	_____	1 2 3 4	_____
Other	_____	_____	_____	1 2 3 4	_____

WORK EXPERIENCE

Present Employer or Most Recent				Supervisor Name	
Address		City	State	Zip	Phone #
Position	Month/Year Began	Month/Year Ended		Final Wage	
Reason For Leaving			If currently employed may we contact your employer?		

Employer				Supervisor Name	
Address		City	State	Zip	Phone #
Position	Month/Year Began	Month/Year Ended		Final Wage	
Reason For Leaving					

Employer				Supervisor Name	
Address		City	State	Zip	Phone #
Position	Month/Year Began	Month/Year Ended		Final Wage	
Reason For Leaving					

I affirm that all information in this application is true and complete and any misrepresentation, false statement, or omission of facts called for shall be grounds for refusal of employment or if hired, dismissal from employment. If hired, I hereby agree to abide by all policies and rules of StonePepper's (The Company) and understand that these policies and rules may be amended at any time and that nothing in this application creates, or will create, an express or implied contract of employment. I understand that the Company may change any wages, benefits and conditions of employment at any time. I also understand that my employment and compensation can be terminated with or without cause, and with or without notice, at any time at the option of StonePepper's.

I hereby give StonePepper's permission to contact all of my references for information and release these references from any liability or damages which may result from furnishing this information. _____ INITIALS

SIGNATURE _____ DATE _____