



# Student Application for Employment

## PERSONAL INFORMATION

Date:

First Name:

M.I.

Last Name:

Home Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Date of Birth:

Age:

Name of Parents/Guardian:

Phone:

## POSITION APPLYING FOR

Business:

Department:

Title:

Referred By:

Date Available:

## EDUCATION

School You Are Now Attending:

Grade You Are Presently In:

Favorite Teacher:

Favorite Subject:

Extra Curricular Activities:

Other Interests:

**PREVIOUS EMPLOYMENT**

Is This Your First Job?

If No, Where Did You Work Last?

Company Name:

Address:

Phone:

Name of Supervisor:

Job Title & Description:

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Hourly Pay:

**PERSONAL REFERENCE**

*(Person we can call for a reference.)*

Name & Occupation:

Phone:

Is this person a friend, relative or former employer?

Name & Occupation:

Phone:

Is this person a friend, relative or former employer?

**OTHER INFORMATION**

Why do you want to work for us?

Do your parents support your working?

The facts set forth above in my application are true and complete. I understand that, if employed, false statement on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and criminal record through any law enforcement, investigative or credit agency of your choice.

Signature of Applicant:

Date:

## Interview - Student Schedule

| DAY OF THE WEEK  | 6-7 | 7-8 | 8-9 | 9-10 | 10-11 | 11-12 | 12-1 | 1-2 | 2-3 | 3-4 | 4-5 | 5-6 | 6-7 | 7-8 | 8-9 | 9-10 | 10-11 | 11-12 |  |
|------------------|-----|-----|-----|------|-------|-------|------|-----|-----|-----|-----|-----|-----|-----|-----|------|-------|-------|--|
| <b>MONDAY</b>    |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>TUESDAY</b>   |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>WEDNESDAY</b> |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>THURSDAY</b>  |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>FRIDAY</b>    |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>SATURDAY</b>  |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |
| <b>SUNDAY</b>    |     |     |     |      |       |       |      |     |     |     |     |     |     |     |     |      |       |       |  |

1. Mark in each box with an "X" all the hours when you are in school!
2. Fill in each box with a "Y" all the hours taken up by Church, Extra-Curricular activities and other time demands.