BARBERITOS™ APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

NAME: _____

       LAST   FIRST   M.I.

ADDRESS: _____ APT #: _____

CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: (____) ____ - _____

EMAIL ADDRESS: _____

EMPLOYMENT QUESTIONNAIRE

POSTION: _____ DATE OF AVAILABILITY: _____ DESIRED WAGE: _____

IS THIS WAGE NEGOTIABLE? (CHECK ONE) YES ☐ NO ☐

HAVE YOU EVER APPLIED OR BEEN EMPLOYED WITH BARBERITOS BEFORE? (CHECK ONE) YES ☐ NO ☐

IF SO WHERE, WHEN? _____

DO YOU HAVE ANY RELATIVES OR PEOPLE WHO LIVE WITH YOU WHO HAVE BEEN OR ARE CURRENTLY EMPLOYED BY BARBERITOS? (CHECK ONE) YES ☐ NO ☐

IF SO WHO/WHEN? _____

AVAILABILITY (PLEASE INDICATE YES OR NO)

	SUN	MON	TUES	WED	THURS	FRI	SAT
MORNING (8 AM – 4 PM)							
EVENING (4 PM – 11 PM)							

BACKGROUND INFORMATION

EDUCATION (LOCATION & DATES):

HIGH SCHOOL: _____

COLLEGE: _____

OTHER: _____

PREVIOUS EMPLOYMENT HISTORY

COMPANY: _____ PHONE: (____) _____ POSITION: _____

ADDRESS: _____ CITY: _____ STATE: _____

DATES WORKED (MON/YEAR): FROM _____ / _____ TO _____ / _____ HOURLY RATE OF PAY: _____

REASON FOR LEAVING: _____ SUPERVISOR: _____

COMPANY: _____ PHONE: (____) _____ POSITION: _____

ADDRESS: _____ CITY: _____ STATE: _____

DATES WORKED (MON/YEAR): FROM _____ / _____ TO _____ / _____ HOURLY RATE OF PAY: _____

REASON FOR LEAVING: _____ SUPERVISOR: _____

COMPANY: _____ PHONE: (____) _____ POSITION: _____

ADDRESS: _____ CITY: _____ STATE: _____

DATES WORKED (MON/YEAR): FROM _____ / _____ TO _____ / _____ HOURLY RATE OF PAY: _____

REASON FOR LEAVING: _____ SUPERVISOR: _____

REFERENCES (PLEASE DO NOT USE FAMILY MEMBERS)

NAME: _____ PHONE: (____) _____ YEARS KNOWN: _____

ADDRESS: _____ CITY: _____ STATE: _____

NAME: _____ PHONE: (____) _____ YEARS KNOWN: _____

ADDRESS: _____ CITY: _____ STATE: _____

NAME: _____ PHONE: (____) _____ YEARS KNOWN: _____

ADDRESS: _____ CITY: _____ STATE: _____

DATE: _____ SIGNATURE: _____