

Iceberg Ice Cream Application for Employment

Name _____ Birthdate _____

Shore Address _____

Permanent Address _____

Home Phone# _____ Cell Phone# _____

Availability:

Days: Su M T W Th F Sa Hours: Daytime Evening

(please circle)

How many hours per week are you willing to work? _____ Date you can start _____ Date you can work until _____

Have you worked at Iceberg before? _____ When? _____ Do you participate in any summer activities? _____ If so, what are they and when? _____

Do you know of any dates in the summer that you will be away or unable to work?

What is your reason for seeking employment with us? _____

Previous Employment

Name of Employer _____

Address & Phone # _____

Dates employed there: _____ May we contact them? _____

Name of Employer _____

Address & Phone # _____

Dates employed there: _____ May we contact them? _____

Name of Employer _____

Address & Phone # _____

Dates employed there: _____ May we contact them? _____

Signature of Applicant _____ Date _____