APPLICATION FOR EMPLOYMENT – GEORGETOWN MARKET

	RMATION	DATE OF	APPLICATIO	N:	
Name:					
	LAST	FI	RST		MIDDLE INITIAL
Present Address:	STREET		CITY/STATE	ZII	PCODE
CONTACT INFO:(()				
	CELL PHONE			EMAIL (PRINT)	
How did you learn a	about our company?				
EMPLOYMENT IN	FORMATION:				
Type of Position De	esired:				
# Hours Desired: _	Full-time	Part-time	Date Available	to Work	
Days/Times Availal	ole to Work:	Are yo	u available on v	veekends?	YesNo
_	ourly Rate: \$	-			
	work in the US?	-	,,		
	state Visa type:				
	state visa type		<u> </u>		
EDUCATION:	of School	Years	Did You	Sı	ubjects
Name and Location of School		Attended Graduate?			udied
High School					
g. Coco.					
College					
-					
Ŭ					
Business/Trade					
Business/Trade	PERIENCE:				
Business/Trade PREVIOUS EXP		ER SALA	RY POSITION	REASON FO	OR LEAVING
Business/Trade PREVIOUS EXP ATE/MONTH/YEAR		ER SALA	RY POSITION	REASON FO	OR LEAVING
PREVIOUS EXP ATE/MONTH/YEAR om:		ER SALA	ARY POSITION	REASON FO	OR LEAVING
PREVIOUS EXP ATE/MONTH/YEAR om:		ER SALA	ARY POSITION	REASON FO	OR LEAVING
PREVIOUS EXP ATE/MONTH/YEAR Tom: D: Tom: D: Tom: D: Tom:		ER SALA	ARY POSITION	REASON FO	OR LEAVING

GENERAL INFORMAT										
Have you ever been employed with Georgetown Market? Yes No If yes, dates of employment: From To: Do you have any friends, acquaintances, or family who are currently employed by us? Yes N If yes, please name:										
							Have you ever been co	nvicted of a felony?	Yes No	
							f yes, state crimes, cou	urt(s), and sentence	e(s):	
							REFERENCES: Please list three individ	uals (other than rela	atives) whom we may c	contact for work-related references:
Name:	Title:	Address:	Phone:							
hereby certify that the in hat any falsification or sig after employment, may be	formation provided of gnificant omissions of e grounds for dismiss that the employment	n this application may res al. I understand and agre relationship is terminable	and complete. I understand and agree sult in not being hired or, if found out ee that under the terms of employmente "at will" by either party without notice							
establishing my identity a drug/alcohol screen may	nd right to work in the be part of the applica	e United States. I underst	ability to comply with INS regulations tand that a pre-employment erstand that neither this document nor employment contract.							
		pe considered active for a ept the same as condition	a period of ninety days. I have read and as of employment.							
Applicant's Signature:										
Printed Signature:										
terviewed by:		D	Date:							

Please list any additional skills you feel relevant to the job you are applying for: