

APPLICATION FOR EMPLOYMENT FORM

Mangelsen's is an Equal Opportunity Employer dedicated to a policy of non-discrimination in employment on any basis including race, religion, color, sex, age, national origin, marital status or disability. Please answer all the following questions as completely as possible. Your application will be considered active for six months.

PERSONAL INFORMATION:

NAME:

Last	First	Middle		
ADDRESS:				
Number	Street City	State	Zip	
TELEPHONE:	Oli Cott Oity	LAST 4 OF SS #:	Σίμ	
Referred by: (circle one) (Newspape		Email Address:		
Пемэрара	or Au Other.			
EMPLOYMENT DES	IRED			
D. W.		E UT	D. I.T.	
Position		Full Time	Part Time	Temporary
Salary Desired				
If you were employed und	er a name other than your present n	ame, please indicate the for	mer name for reference	e checking nurnoses:
ii you woro omployou unu	or a name early than your process in	arrio, prodoc marcato trio for	mor name for reference	or oncoming purpodes.
II	······································			
If yes, give circumstances	narged or requested to resign from a	position?		
n yoo, givo on oumounou	•			
David Harris	Harma Arraftable.	Milest data and		
Days/Hours Available	Hours Available:	What date are y		
Days/Hours Available	Hours Available: from to	available to sta	rt work?	
Available		available to sta		Experience
Days/Hours Available Sunday		available to sta	rt work?	Experience
Available		available to sta	rt work?	Experience
Available Sunday		Dept Art Supplies	rt work?	Experience
Available Sunday Monday		Dept Art Supplies Cake Décor	rt work?	Experience
Available Sunday Monday Tuesday Wednesday		Art Supplies Cake Décor Candles	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday		Art Supplies Cake Décor Candles Cashier Crafts/Fabrics	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday Friday		available to sta Dept Art Supplies Cake Décor Candles Cashier Crafts/Fabrics Floral	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday Friday Saturday	from to	available to sta Dept Art Supplies Cake Décor Candles Cashier Crafts/Fabrics Floral Framing	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday Friday Saturday		available to sta Dept Art Supplies Cake Décor Candles Cashier Crafts/Fabrics Floral Framing Party Goods	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday Friday Saturday	from to	available to stand	rt work?	Experience
Available Sunday Monday Tuesday Wednesday Thursday Friday Saturday	from to	available to sta Dept Art Supplies Cake Décor Candles Cashier Crafts/Fabrics Floral Framing Party Goods	rt work?	Experience

TYPE OF	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS	MAJOR &
SCHOOL ligh School			COMPLETED	DEGREE
ngir concor				
College				
Johogo				
Trade School				
WORK EXPER	RIENCE:			
Please list you	r work experience beginning t your present employer?	g with your most recent job he	eld. Attach additional shee	ets if necessa
Name of employer		Name of last supervisor	Employment dates	
Address City, State, Zip Phone number			From	
			То	
		Your last job title:	Your last job title:	
Reason for leaving				
reason for leaving	g.			
	-	or learned while you worked at this	company:	
List the jobs you h	neld, duties performed, skills used			
List the jobs you h	neld, duties performed, skills used	or learned while you worked at this Name of last supervisor	Employment dates	
List the jobs you h Name of employer Address City, State, Zip	neld, duties performed, skills used		Employment dates From	
List the jobs you how	neld, duties performed, skills used	Name of last supervisor	Employment dates	
Name of employed Address City, State, Zip Phone number	neld, duties performed, skills used		Employment dates From	
List the jobs you h Name of employer Address City, State, Zip	neld, duties performed, skills used	Name of last supervisor	Employment dates From	
Name of employed Address City, State, Zip Phone number	neld, duties performed, skills used	Name of last supervisor	Employment dates From To	
Name of employed Address City, State, Zip Phone number	neld, duties performed, skills used	Name of last supervisor Your last job title:	Employment dates From To	
Name of employed Address City, State, Zip Phone number	neld, duties performed, skills used	Name of last supervisor Your last job title:	Employment dates From To	
Name of employed Address City, State, Zip Phone number Reason for leaving List the jobs you h	g: neld, duties performed, skills used	Name of last supervisor Your last job title: or learned while you worked at this	Employment dates From To company:	
Name of employed Address City, State, Zip Phone number Reason for leaving List the jobs you have of employed Name of employed the state of employed the st	g: neld, duties performed, skills used	Name of last supervisor Your last job title:	Employment dates From To	
Name of employer Address City, State, Zip Phone number Reason for leaving List the jobs you he Name of employer Address City, State, Zip	g: neld, duties performed, skills used	Name of last supervisor Your last job title: or learned while you worked at this	Employment dates From To company:	
Name of employer Address City, State, Zip Phone number Reason for leaving List the jobs you he Name of employer Address City, State, Zip	g: neld, duties performed, skills used	Name of last supervisor Your last job title: or learned while you worked at this	Employment dates From To company: Employment dates	
Name of employer Address City, State, Zip Phone number Reason for leaving List the jobs you he Name of employer Address	g: neld, duties performed, skills used	Name of last supervisor Your last job title: or learned while you worked at this	Employment dates From To company: Employment dates From	
Name of employer Address City, State, Zip Phone number Reason for leaving List the jobs you he Name of employer Address City, State, Zip	g: neld, duties performed, skills used	Name of last supervisor Your last job title: or learned while you worked at this Name of last supervisor	Employment dates From To company: Employment dates From	

WORK EXPERIENCE: (continued)

Name of employer Address	Name of last supervisor	Employment dates				
City, State, Zip		From				
Phone number		То				
	Your last job title:					
Reason for leaving:						
List the jobs you held, duties performed, skills used or learn	ad while you worked at this	company.				
List the jobs you held, duties performed, skills used of learn	ed wrille you worked at triis	company.				
REFERENCES:						
Please list several references other than relatives	5.					
Name:	Name:	Name:				
Position:	Position:					
Company:	Company:					
Address:	Address:					
Telephone:	Telephone:	Telephone:				
Name:	Name:					
Position:	Position:					
Company:	Company:	Company:				
Address:	Address:	Address:				
Telephone:	Telephone:	Telephone:				
Have you been convicted of any felony or misder	meanor, other than min	or traffic violations? Yes No				
I certify that information contained in this applica						
be grounds for not hiring me or for immediate ter authorize the verification of any or all information		nt at any point in the future if I am hired. I				
additioned the verification of any of all information holes above.						
0: 1						
Signature	0.1	Date				
Driver's License #	State:					