



APPLICATION FOR EMPLOYMENT AT DAIRY DREAM OF LIBERTYVILLE

NAME _____ PHONE _____

ADDRESS _____

DATE YOU CAN START _____ DO YOU HAVE A VALID DRIVERS LICENSE? _____

ARE YOU CURRENTLY EMPLOYED? _____

IF YES, BY WHOM AND CAN WE CONTACT YOUR EMPLOYER? _____

REFERRED BY (INCLUDE CURRENT PHONE NUMBER) _____

SALARY DESIRED _____ IF STILL ATTENDING SCHOOL, PRESENT GRADE _____

NAME OF SCHOOL _____

ACTIVITIES (CIVIL, ATHLETIC, HOBBIES, ETC.)

NAMES AND NUMBERS OF FORMER EMPLOYERS, JOB DESCRIPTION, AND REASON FOR LEAVING

1. _____
2. _____
3. _____

REFERENCES: GIVE NAMES AND NUMBERS OF THREE PERSONS NOT RELATED TO YOU WHO WE MAY CONTACT, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR. PLEASE INCLUDE A PHONE NUMBER

1. _____
2. _____
3. _____

WHY DO YOU BELIEVE YOU WOULD BE A GOOD "FIT" FOR DAIRY DREAM?
