Personal Information (please print)

Name Last First Middle Initial

Present Address

StreetCity State Zip Code

Phone Number ( ) Email:

Specify Hours Available to Work (check the shifts are able to work)

Sunday

6:30 am to 1:00 pm 1:00 pm to 7:30 pm

Monday

5:30 am to 12:30 pm 12:30 pm to 7:30 pm

Tuesday

5:30 am to 12:30 pm 12:30 pm to 7:30 pm

Wednesday

5:30 am to 12:30 pm 12:30 pm to 7:30 pm

Thursday

5:30 am to 12:30 pm 12:30 pm to 7:30 pm

Friday

5:30 am to 12:30 pm 12:30 pm to 7:30 pm

Saturday

6:30 am to 1:00 pm 1:00 pm to 7:30 pm

Are you currently going to school/Where and what year

Do you have experience as a Barista? Bartender?

Describe a situation in which you solved a problem at work, with a customer or in your personnel life.

Former Employers

Date worked Position

Former Employers

Date worked Position

Former Employers

Date worked Position