



Snack Bar Workers Application

Date of Application _____

Personal Information

NAME (LAST NAME FIRST)		DATE OF BIRTH	
CELL PHONE NUMBER		SECONDARY PHONE NUMBER	REFERRED BY

Employment

ARE YOU EMPLOYED NOW?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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Education History (Current or Past)

	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE
HIGH SCHOOL			
COLLEGE			

General Information

DAYS/ HOURS AVAILABLE	
SPECIAL TRAINING	
SPECIAL SKILLS	

Personal References

NAME	
RELATIONSHIP	
CELL PHONE NUMBER	
HOME PHONE NUMBER	

NAME	
RELATIONSHIP	
CELL PHONE NUMBER	
HOME PHONE NUMBER	

I hereby declare all the above is true and accurate and I understand if this information is found to be false, I will lose my right to work at the Snack Bar. I also agree to be video recorded while working in the snack bar at all times. I also understand if caught stealing money, food or drinks and/or giving free items away, I will be removed from the snack bar and CYB will prosecute to the fullest extent of the law.

Name (Printed) _____

Date _____

Signed _____