



2019 EMPLOYMENT APPLICATION

FRANKLIN SQUARE DELI, INC.

1_2_3_4_5_

108 South Water Street, KENT, OHIO 44240 - 330-673-2942

This establishment seeks only SELF MOTIVATED, ENERGETIC, CHARISMATIC and DISCIPLINED individuals to assist in meeting all the daily goals and obligations of operating a highly successful food service operation. Applicants are considered for positions without regard to race, color, religion, origin, age, marital or veteran status or the presence of a non-job related medical condition or handicap.

Last FOUR Digits of Social Security # _____ Application Date ____/____/____ Birthdate ____/____/____

First Name _____ Middle Name _____ Last Name _____

Current Address _____ Phone _____

Parent/Permanent Address _____ Phone _____

E-mail Address _____ Drivers License # _____

Are you currently employed? _____ Will you remain at current job? _____ Amount of hours that you currently work _____

Have you ever held two jobs at once _____ Are you currently a student? _____ Hourly class load per week _____

Date you can start work ____/____/____ If you are employed, may we contact your current employer _____

Current employer contact - Company _____ Contact _____ Phone _____

If Student, will you remain at close of current school term _____ Until what approximate date ____/____/____

Were you referred here by a current employee, friend or relative (name) _____

Were you involved in any formal Management or Management Training _____ Where _____

Are you currently a user of Tobacco products _____ Are You Currently Covered Under Any Health Coverage _____

Do you get excited about foods, consider yourself a "Foodie" or a Food "Junkie"? Somewhat __ Yes__ Absolutely __

Describe all Skills and Qualifications that would relate favorably to this position:

Detail Hours You Are AVAILABLE To Work	
Sun.	Thur.
Mon.	Fri.
Tue.	Sat.
Wed.	

PREVIOUS EMPLOYMENT HISTORY (other than listed above), Use reverse side if more space is needed for information.

MOST RECENT

Business

Position/Wage

Contact Info

Reason for leaving

1ST PREVIOUS

Business

Position/Wage

Contact Info

Reason for leaving

2ND PREVIOUS

Business

Position/Wage

Contact Info

Reason for leaving

Emergency Contact Name _____ Phone _____ Relationship _____

I Authorize Investigation Of All Information Contained On This Application SIGNATURE:

IF UNDER THE AGE OF 18, PARENTS SIGNATURE IS NEEDED ALSO: