

Employment Application

Mr. / Ms			Date:		
			_)		
			City:		
Zip: E	mail:		Position Desired:		
Have you ever been convicted of a felony?			DOB (If under 18):		
Do you know any Previous Employe		t Café Eclectio	:?		
Employer /		Duties	Start/End Date	Reason For	
Address/Phone	iviariagei	Daties	Start/End Date	Leaving	
Skills:					
Personal Referen	ces:				
Name Phone			Relations	Relationship	
1	()				
2	()				
3	()				
Please write availability and hours desired on the back of the application.					
Signature:					

Applications can be dropped off at any Café Eclectic location.