

# Employment Application Form

**Chicha Shack**  
Ames-Des Moines-Coralville  
Iowa  
(515)-371-7795  
[www.chichashack.com](http://www.chichashack.com)

Location you are applying for: \_\_\_\_\_

DATE \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Initial

Present address \_\_\_\_\_  
Number Street City State Zip

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Position applied for \_\_\_\_\_  
and salary desired \_\_\_\_\_

Days/hours available to work

No Pref \_\_\_\_\_ Thur \_\_\_\_\_

Mon \_\_\_\_\_ Fri \_\_\_\_\_

Tue \_\_\_\_\_ Sat \_\_\_\_\_

Wed \_\_\_\_\_ Sun \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

When available for work? \_\_\_\_\_

**Education:** (degrees, diplomas, etc...)

School \_\_\_\_\_ Degree \_\_\_\_\_ Year \_\_\_\_\_

School \_\_\_\_\_ Degree \_\_\_\_\_ Year \_\_\_\_\_

School \_\_\_\_\_ Degree \_\_\_\_\_ Year \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME IN or OUT OF STATE? \_\_\_ No \_\_\_ Yes

If yes, explain \_\_\_\_\_

DO YOU HAVE A DRIVER'S LICENSE? \_\_\_ Yes \_\_\_ No

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name \_\_\_\_\_

Company \_\_\_\_\_

Position \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Position \_\_\_\_\_  
Telephone (    ) \_\_\_\_\_

**Work Experience:**

Please list your work experience for the **past three years** beginning with your most recent job held.

Name of employer \_\_\_\_\_  
Address \_\_\_\_\_  
Name of last supervisor \_\_\_\_\_ Phone # (    ) \_\_\_\_\_  
Employment period From \_\_\_\_\_ To \_\_\_\_\_  
Your last job title \_\_\_\_\_  
Reason for leaving (be specific) \_\_\_\_\_  
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Name of employer \_\_\_\_\_  
Address \_\_\_\_\_  
Name of last supervisor \_\_\_\_\_ Phone # (    ) \_\_\_\_\_  
Employment period From \_\_\_\_\_ To \_\_\_\_\_  
Your last job title \_\_\_\_\_  
Reason for leaving (be specific) \_\_\_\_\_

Name of employer \_\_\_\_\_  
Address \_\_\_\_\_  
Name of last supervisor \_\_\_\_\_ Phone # (    ) \_\_\_\_\_  
Employment period From \_\_\_\_\_ To \_\_\_\_\_  
Your last job title \_\_\_\_\_  
Reason for leaving (be specific) \_\_\_\_\_

The facts set forth in my application for employment are true and complete. I understand if I'm employed, any false statement in this application may result in my dismissal. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any or no reason.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_