

EMPLOYMENT APPLICATION



newport natural
market & cafe

Date: _____

How did you find out about possible employment at Newport Natural? _____

802.334.2626

GreatFood@newportnatural.com

194 Main Street, Newport, VT 05855

PERSONAL INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____
Street Apt# City State Zip

Tel (cell): _____ Tel (home): _____

Email: _____ SSN: _____ Are you at least 18 years old? Yes No

Do you have a valid drivers license? Yes No Do you have a car in reasonable condition? Yes No

IN CASE OF EMERGENCY NOTIFY Relationship to you: _____

First Name: _____ Last Name: _____ Tel. #: _____

EMPLOYMENT DESIRED

Full Time

Part Time

Position: _____ Date you can start: _____ Salary desired: _____

Why do you think you would do well at, and enjoy this position:

Are there any physical or emotional attributes you have that might make doing this job difficult:

Please describe what times you would like to work and what times you have available:

PRESENT EMPLOYMENT Not currently employed

Business Name: _____ Position: _____ Salary: _____ Started: _____

Contact Name: _____ Tel #: _____ Can we contact them? Yes No

Reason for wanting to leave: _____

PAST EMPLOYMENT

Business Name: _____ Position: _____ Salary: _____

Contact Name: _____ Tel #: _____ From: _____ To: _____
date date

Reason for leaving: _____ Can we contact them? Yes No

Business Name: _____ Position: _____ Salary: _____

Contact Name: _____ Tel #: _____ From: _____ To: _____
date date

Reason for leaving: _____ Can we contact them? Yes No

Business Name: _____ Position: _____ Salary: _____

Contact Name: _____ Tel #: _____ From: _____ To: _____
date date

Reason for leaving: _____ Can we contact them? Yes No

EDUCATION HISTORY Education History is included on my Resume

Institution: _____ Program: _____ Successfully Completed? Year No

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PERSONAL REFERENCES Personal references are included on my Resume

Name: _____ Relationship: _____ Tel. #: _____

Name: _____ Relationship: _____ Tel. #: _____

Name: _____ Relationship: _____ Tel. #: _____

Signature: _____

Date: _____