

**APPLICATION FOR SEASONAL EMPLOYMENT**  
(PRE-EMPLOYMENT QUESTIONNAIRE)

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
LAST
FIRST
MIDDLE

PRESENT ADDRESS \_\_\_\_\_  
STREET
CITY
ZIP

TELEPHONE NO \_\_\_\_\_ EMAIL \_\_\_\_\_

CAN YOU LEGALLY WORK IN THE UNITED STATES?                      YES                      NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY?                      YES                      NO

**EMPLOYMENT DESIRED:**

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? \_\_\_\_\_

HAVE YOU EVER APPLIED FOR WORK AT WOJO'S BEFORE? \_\_\_\_\_  
 IF SO, WHEN? \_\_\_\_\_

ARE YOU APPLYING FOR:                      FULL TIME                      PART TIME

LOCATION WOULD YOU PREFER TO WORK AT?    DAVISON    ORTONVILLE    ANY

WHAT DAYS AND HOURS ARE YOU AVAILABLE TO WORK?  
 (WEEKENDS REQUIRED DURING MAY)

MON      TUE      WED      THU      FRI      SAT      SUN

REFERRED BY \_\_\_\_\_

EDUCATION	NAME/LOCATION OF SCHOOL	*NO OF YRS ATTENDED	*DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, CORRESPONDENCE SCHOOL				

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_

SPECIAL SKILLS \_\_\_\_\_

ACTIVITIES (CIVIC, ATHLETIC, ETC.) \_\_\_\_\_

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS

U.S. MILITARY OR PRESENT MEMBERSHIP IN  
NAVAL SERVICE \_\_\_\_\_ RANK \_\_\_\_\_ NATIONAL GUARD OR RESERVES \_\_\_\_\_

\*THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1987 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 YEARS OF AGE. AN EQUAL OPPORTUNITY EMPLOYER

**FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST):**

DATE MONTH & YEAR	NAME OF EMPLOYER	ADDRESS OF EMPLOYER	EMPLOYER PHONE #	SALARY	POSITION
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					

WHICH OF THESE JOBS DID YOU LIKE BEST? \_\_\_\_\_

WHAT DID YOU LIKE ABOUT THIS JOB? \_\_\_\_\_

**REFERENCES: GIVE THE NAMES OF THREE PEOPLE NOT RELATED TO YOU**

NAME	ADDRESS	PHONE #	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCY, NOTIFY \_\_\_\_\_  
NAME ADDRESS PHONE NO

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

DATE SIGNATURE \_\_\_\_\_