

Paccini's Tazza d'Oro Caffè
Employment Application

NAME _____ DATE _____

ADDRESS _____

HOME PHONE # _____ CELL PHONE # _____

EMAIL ADDRESS _____

DRIVERS LICENSE # _____ STATE _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

PRESENT OCCUPATION _____

NAME OF SUPERVISOR _____

HIRE DATE _____ STARTING PAY \$ _____ CURRENT PAY \$ _____

PAST EMPLOYMENT

Company Name	Address	Phone #	Job Title	Supervisor
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1.

2.

3.

4.

5.

6.

PERSONAL REFERENCES

Name Phone # Relationship

1.

2.

3.

AVAILABILITY - List Times Available Each Day

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

List days you cannot work _____

Do you drink coffee? _____

Why should we hire you? _____

Have you ever been convicted of a felony? _____

Signature _____ Date _____