

BULLWINKLE'S EMPLOYMENT QUESTIONNAIRE

PERSONAL DATA

LAST NAME	FIRST	MIDDLE INITIAL			
HOME ADDRESS			PERMANENT ADDRESS		
STREET			STREET		
CITY	STATE	ZIP	CITY	STATE	ZIP
TELEPHONE-AREA CODE NUMBER ()			TELEPHONE-AREA CODE NUMBER ()		
PERSON TO CONTACT IN AN EMERGENCY		FULL NAME	TELEPHONE-AREA CODE NUMBER ()		

EMPLOYMENT INFORMATION

CIRCLE THE POSITION(S) YOU ARE APPLYING FOR:
KITCHEN DRIVER BARTENDER DISHWASHER DOUGH MAKER \$ _____ PER WEEK

*I UNDERSTAND THAT AN OFFER OF EMPLOYMENT , AND MY CONTINUED
 EMPLOYMENT WITH BULLWINKLES, INC. ARE CONTINGENT UPON
 PLEASE INITIAL _____ SATISFACTORY PROOF OF MY AUTHORIZATION TO WORK IN THE UNITED STATES.*

SOCIAL SECURITY NUMBER _____ WHAT IS YOUR AGE RANGE? (CIRCLE ONE) 16 OR OVER
 18 OR OVER 21 OR OVER

HAVE YOU EVER BEEN EMPLOYED BY BULLWINKLES?
 IF YES, PLEASE CIRCLE LOCATION(S) AND SPECIFY DATE(S) OF EMPLOYMENT.

TOWN DATES _____
 VALLEY DATES _____

HAVE YOU EVER PREVIOUSLY APPLIED FOR A POSITION WITH BULLWINKLES?
 LOCATION(S) _____ DATES _____

HOW WERE YOU REFERRED TO BULLWINKLES? _____

WHEN COULD YOU BE AVAILABE TO BEGIN WORK? _____

CIRCLE TYPE OF EMPLOYMENT DESIRED: FULL-TIME PART-TIME

EDUCATION AND TRAINING

SCHOOL	NAME & ADDRESS OF SCHOOL	DATES ATTENDED		GRADUATED?	TYPE OF DEGREE	FIELD OF STUDY
		FROM MO/YR	TO MO/YR			
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
OTHER EDUC OR TRAINING						

ACADEMIC ACHIEVEMENTS AND ACTIVITIES: PLEASE LIST ACADEMIC HONORS, SCHOLARSHIPS OR FELLOWSHIPS; MEMBERSHIPS IN ACADEMIC HONORARY SOCIETIES; OR PARTICIPATION IN EXTRACURRICULAR ACTIVITIES YOU CONSIDER SIGNIFICANT.