STUDENT EMPLOYMENT APPLICATION



| NAME | | AGE | |
|-------------------------------|-------------------------|------------------------|--|
| ADDRESS | CITY | | |
| HOME PHONE | | | |
| BIRTHDATE | SOCIAL SECURITY # | | |
| EMAIL ADDRESS | | | |
| EXTRA-CURRICULAR ACTIVITIES | S (CLUBS, SPORTS, ETC.) | | |
| REFERENCES: | | | |
| 1. NAME | PHONE | | |
| 2. NAME | | | |
| ANY PREVIOUS WORK EXPERIEN | CE? | | |
| FAMILY VACATION | | | |
| HOW MANY DAYS CAN YOU WOR | | | |
| ARE YOU WILLING TO WORK WE | EKEND NIGHTS? (MISS GAM | ES, ETC.) | |
| ARE YOU ABLE TO WORK DAYS A | AND NIGHTS? | | |
| CAN YOU WORK WEEKDAY / WEI | | | |
| ARE YOU RIGHT HANDED OR LEF | T HANDED? | | |
| DO YOU KNOW ANYONE WHO WO | ORKS AT HANDEL'S? | | |
| WHY DO YOU WANT TO WORK A | T HANDEL'S? | | |
| WHAT PERSONAL QUALITIES WO | OULD MAKE YOU A GOOD HA | ANDEL'S EMPLOYEE? | |
| APPLYING FOR POSITION AT FISH | IERS OR CARMEL STORE? | | |
| PARENTS / STUDENTS - PLEASE | REVIEW THE ENTIRE APPL | ICATION BEFORE SIGNING | |
| STUDENTS SIGNATURE | | DATE | |
| PARENTS SIGNATURE | | DATE | |

BACK PAGE INCLUDES INFORMATION REGARDING ORIENTATION AND NECESSARY STARTING DOCUMENTS.

CONCERNING THE HOURS OF ORIENTATION

ORIENTATION HOURS ARE FOR THE SOLE PURPOSE OF EVALUATING TRAINEE'S ABILITY TO PERFORM THE NECESSARY DUTIES WHILE IN THE EMPLOYEE OF HANDEL'S. THE ORIENTATION HOURS (WHICH CAN TAKE UP TO 10 HOURS OR MORE, DEPENDING ON THE ABILITY OF THE APPLICANT) WILL BE COMPENSATED WITH A FLAT RATE OF \$25 AFTER 30 DAYS OF ACTUAL WORK TIME. IN THE EVENT THE TRAINEE ISN'T HIRED DUE TO THEIR OWN INABILITY TO PERFORM, THERE WILL BE NO COMPENSATION FOR THESE HOURS.

| TRAINEE'S SIGN | NATURE | | | | - | |
|-----------------|---------------|-------------|---------------|------------|----------------|------|
| PARENT'S SIGN | ATURE | | | | - | |
| TRAINING CAN | NOT BEGIN U | NTIL A COMI | PLETED SCHO | OOL WORK I | PERMIT AND W-4 | IS |
| SUBMITTED TO |) HANDEL'S ST | ORE MANAG | ER | | | |
| | | | | | | |
| ***** DO | NOT COMPLE | TE BELOW TI | HIS LINE, FOF | R HANDEL'S | USE ONLY ***** | **** |
| | | | | | | |
| STARTING SALA | ARY | | | | | |
| RAISE | DATE | | | | | |
| RAISE | DATE | | | | | |
| RAISE | DATE | | | | | |
| POSITION | | | | | | |
| | | | | D? | | |