

**APPLICATION FOR EMPLOYMENT**

PRE-EMPLOYMENT QUESTIONNAIRE  
EQUAL OPPORTUNITY EMPLOYER

**Personal Information**

**Date:**

Name (Last; First; M.I.)			
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Phone No.	Referred By:		

**Employment Desired**

Position	Date You Can Start						
Are You Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If So, May We Inquire Of Your Present Employer?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Days And Specific Hours You Are Available:	Mon	Tues	Wed	Thurs	Fri	Sat	Number of Days per Week You Are Available:

**Education History**

	Name And Location Of School	Years Attended	Did You Graduate?
High School			
College			
Trade, Business Or Correspondence School			

**Former Employers (List Below Last Three Employers, Starting With Last One First)**

Date-Month And Year	Previous Employers	Salary	Position	Reason For Leaving
From To	Name: Address: Phone Number:			
From To	Name: Address: Phone Number:			
From To	Name: Address: Phone Number:			

Please read these questions and instructions, answer the questions, and sign at the bottom to complete the application.

- 1) Are you 16 years of age or older? Proof of age in the form of an ID will be required.  
 Yes       No
- 2) Are you legally able to be employed in the United States of America? If you are hired, verification of this is required by law.  
 Yes       No
- 3) In your history, have you ever been convicted of a criminal offense, or are there currently any criminal charges pending against you?  
 Yes       No

### **Personal Hygiene Policies**

Good personal hygiene is essential for working in our candy store at every position. It is important to minimize the risk of food borne illness.

The policies include the following:

- 1) Employees must be clean: clothing, hair, skin, hands, and teeth must be clean.
- 2) We are a non-smoking environment.
- 3) Must wash hands:
  - A. In the restroom and again in the kitchen or dipping room.
  - B. Before and after working on the sales floor, filling candy, or touching money.
  - C. After cleaning, taking out the garbage, and sweeping/mopping.
  - D. After touching eyes, hair, skin, clothing, etc.
  - E. After touching any type of cleaning product.
  - F. After coughing or blowing your nose.

### **Dress Code**

- 1) Capri's, pants, or colored jeans.
- 2) No sweatpants.
- 3) No blue jeans (unless you are working in packaging or chocolate dipping).
- 4) No short shorts, but can wear long shorts.
- 5) Can wear casual tops or t-shirts.
- 6) Clothing must look neat and clean.
- 7) No low cut shirts.
- 8) No dresses or skirts due to safety reasons.
- 9) Comfortable shoes (ie. Athletic shoes).
- 10) No flip flops, sandals, high heels, or slippery shoes. Must be closed toe.
- 11) No attire with holes in them.
- 12) No hats or scarves.
- 13) Fingernails: No painted or polished nails, no artificial nails, no nail tips, no clear coat polish, and no nail decoration.
- 14) No visible tattoos.
- 15) No Beards or Mustaches.

**Jewelry**

- 1) No earrings, piercing, or jewelry.
- 2) No tongue piercing.
- 2) One wristwatch may be worn.
- 3) Medical ID may be worn.

**Hair**

- 1) If long, must be pulled back and out of the face: held back by a pony tail or an up do. Hair must be kept out of the face.
- 2) No unnatural hair tones (ie. pink hair).

**Apron & Hair Net**

These will be provided by the employers

**Locker**

- 1) All employees will have a locker.
- 2) All employees must provide and maintain a lock on their locker.

**Cell Phones**

All cell phones must be left in the locker unless there is an emergency situation that is approved by the employer.

**Illness**

- 1) No employees are allowed to work if ill.
- 2) Calls must be made to the store to Carol if you are sick and you will be excused. Call in as soon as you are ill. You should call in at least 1 hour or more before your scheduled time.
- 3) If you feel ill at work let Carol know and you will be sent home.

I, \_\_\_\_\_, verify that all information I provided to this application to be true. I understand that any false statement or omission by me in the application or interview process will create a cause to reject my application or terminate my employment. I authorize investigation of my past record with previous employers and hold no person, business, or organization liable for such information.

Signature \_\_\_\_\_ Date \_\_\_\_\_