

Date_____

Application for Employment

Name: (please PRINT) _____ Position applying for _ Kitchen/_____

Address _____ City _____ ZIP _____

Phones: Home _____ Cell _____ Email: _____

SS# _____ Are you 16 years of age or older? _____

Are you 19 or over? _____ Do you have a current alcohol server certificate? _____

Who to call in an emergency _____ PH _____

When can you start? _____ What shifts can you work? Put a checkmark:

SUN	Day_____	Evening_____
MON	Day_____	Evening_____
TU	Day_____	Evening_____
WED	Day_____	Evening_____
TH	Day_____	Evening_____
FRI	Day_____	Evening_____
SAT	Day_____	Evening_____

How long have you lived in Santa Fe? _____

If you are new to Santa Fe, what brings you here? _____

Where or How did you hear about the job? _____ Have you worked here before? _____

Is there anything about Joe's that interests you? _____

Why would you like to work here? _____

What does **sustainable food production** mean to you? _____

Where was your last locally-produced purchase? _____

What skills and/or qualities would you bring to the position? _____

What character values do you bring to the job? _____

What do you LOVE to do with your time? Is there anything you are truly passionate about? _____

PREVIOUS EMPLOYMENT (starting with most recent job)

◆ Dates _____ to _____ Company _____ City _____

Salary _____ Position/Duties _____

Reason for leaving _____

Supervisor _____ Phone # _____ May we contact? _____

◆ Dates _____ to _____ Company _____ City _____

Salary _____ Position/Duties _____

Reason for leaving _____

Supervisor _____ Phone # _____ May we contact? _____

◆ Dates _____ to _____ Company _____ City _____

Salary _____ Position/Duties _____

Reason for leaving _____

Supervisor _____ Phone # _____ May we contact? _____

REFERENCES: Names of 2 PROFESSIONAL references who have known you at least one year:

1. Name _____ Phone _____

Business/Profession _____ Years Known _____

2. Name _____ Phone _____

Business/Profession _____ Years Known _____

EDUCATION

High School: _____ Years ____ Graduate? YES ____ NO ____

College or Trade School: _____ Years ____ Graduate? YES ____ NO ____

Degrees or subjects studied _____

E-mail _____

(Signature)

I have read and answered all questions to the best of my ability and

I authorize JDAP, Inc. to check my references, do a background check and a drug test if requested