

Mr. Pickle's Sandwich Shop® - Application for Employment

Please complete entire application to ensure processing

Pre-Employment Questionnaire An Equal Opportunity Employer

Personal Information Date: _____

Are you legally entitled to work in the United States? Yes No

Name: _____

Address: Last	First	Middle
Street	City	State
		Zip

Phone #: _____ Are you over 18 years of age? Yes No

Employment Desired

Position: _____ Desired Wage: _____ Date you can start: _____

Cross out shifts unable to work

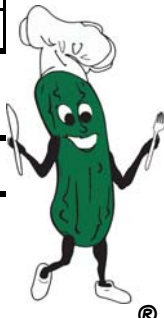
Monday	Day	Tuesday	Day	Wednesday	Day	Thursday	Day	Friday	Day
	Night		Night		Night		Night		Night
Saturday	Day	Sunday	Day	Preferred Area or Location: _____ or: _____					
	Night		Night						

Have you worked for a Mr. Pickle's Shop before? Yes No

If Yes, what location?: _____

How did you learn about us? (please circle one)

Advertisement Walk-in Friend Family Employment Agency



EDUCATION	Name and Address of School	Years Completed	Did you Graduate?
High School:		1 2 3 4	Yes No
College:		1 2 3 4	Yes No
Trade or Business School:		1 2 3 4	Yes No

Have you ever visited a Mr. Pickle's Sandwich Shop® location? Yes No Where? _____

Please describe your experience: _____

Why would you like to work for Mr. Pickle's? _____

Mr. Pickle's Sandwich Shop® - Application for Employment continued.

Former Employers

List below your last three employers, starting with the most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying.

	Name and Address of Employer	Wage	Position	Reason for Leaving
From:				
To:				
Duties Performed: _____				
Supervisor: _____ Phone #: _____ May we contact? Yes No				

	Name and Address of Employer	Wage	Position	Reason for Leaving
From:				
To:				
Duties Performed: _____				
Supervisor: _____ Phone #: _____ May we contact? Yes No				

	Name and Address of Employer	Wage	Position	Reason for Leaving
From:				
To:				
Duties Performed: _____				
Supervisor: _____ Phone #: _____ May we contact? Yes No				

I hereby authorize the recipient of this application to thoroughly investigate my background, references, employment record and other matters to assess my suitability for employment. I authorize persons, schools, my current employer (if applicable) and previous employers and organizations to provide relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any and all claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that nothing contained in this application, or conveyed during any interview, which may be granted, is intended to create an employment contract. I understand that submitting this application does not obligate the recipient to hire me.

DATE

SIGNATURE

Mr. Pickle's Sandwich Shop®s are Equal Opportunity Employers, dedicated to a policy of non-discrimination on any basis including race, color, age, religion, national origin, the presence of mental and/or physical disabilities, sexual orientation.

Please take your completed application in to your preferred employment location.