

Superior Creamery

PO Box 622 – 5 N Broadway Ave – Grand Marais, MN 55604

info@superiorcreamery.com

Employment Application

We are an Equal Opportunity Employer- All qualified applicants will receive consideration for employment without regard to race, color, creed, religion, national origin, sex, marital status, familial status, disability, public assistance status, age, or sexual orientation.

Please note: Incomplete information could disqualify you from further consideration. Please complete all fields below.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Are you eligible to work in the U.S.?

- YES
 NO

Are you at least 18 years or older?

- YES
 NO, list age: _____

How did you hear about us?

- Walk in
 Advertisement (If so, where? _____)
 Referral (If so, who? _____)
 Other (Please specify: _____)

Position Desired: _____ Desired Hourly Rate of Pay: _____ Date you can start: _____

Can you work any shift? ___ YES ___ NO Can you work overtime? ___ YES ___ NO

Are you currently employed? ___ YES ___ NO May we inquire of your present employer? ___ YES ___ NO

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___ YES ___ NO

Do you have any special skills, experience, training, or licenses/certifications that would enhance your ability to perform the position applied for? If yes, please explain:

Education

High School Name: _____ Address: _____

Did you graduate? YES NO Diploma: _____

College/Trade
School Name: _____ Address: _____

Did you graduate? YES NO
 Degree: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact this supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact this supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact this supervisor for a reference? YES NO

References

Please list three professional references.

Name	Phone Number	Relationship

Disclaimer and Signature

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Superior Creamery to hire me.

I attest with my signature below that my answers are true and complete to the best of my knowledge. I authorize Superior Creamery to contact references provided for employment reference checks.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____