

Kellwell Food Management

A EQUAL OPPORTUNITY EMPLOYER

Application and Pre-Employment Questionnaire

Last Name _____ First Name _____ MI. _____ S.S.# _____ - _____

Address _____

City _____ State _____ Zip _____ Phone # _____

Desired Position _____ Day you can start _____ Salary desired _____

EDUCATION

High School Name & Location _____ Date Graduated _____

Collage Name & Location _____ Date Graduated _____

Other School Name & Location _____ Date Graduated _____

PRIOR EMPLOYMENT HISTORY

Employer's Name _____ Address _____

Phone # _____ Start Date _____ Date Left _____ Wages _____

Reason for Leaving _____

Employer's Name _____ Address _____

Phone # _____ Start Date _____ Date Left _____ Wages _____

Reason for Leaving _____

Employer's Name _____ Address _____

Phone # _____ Start Date _____ Date Left _____ Wages _____

Reason for Leaving _____

GENERAL INFORMATION

Drivers license

State	License Number

Would you be willing to move and relocate for a new job opening ?

Yes	X	No	Area
	One		

REFERENCES

Persons not related to you and not former employers.

Name _____ Phone # _____

Name _____ Phone # _____

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and

I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my employment and any pertinent information they may have, personal or otherwise.

I release the company from all liability or any damage that may result from utilization of such information.

Applicant's Signature _____ Date _____