



APPLICATION FOR EMPLOYMENT

DATE APPLIED _____

REFERRED BY _____

Name (Last, First, Middle)	
Address (Street, City, State, Zip Code)	
Phone Number ()	Social Security Number

Position(s) Desired	Salary Desired	Date You Can Start
Are You Employed Now? Yes No	Are You Currently in School? Yes No	Are You at Least ? (Circle Highest Attained Age) 16 18 19
Type of Schedule You are Seeking (Circle Choice) Full Time Part Time	Are There Any Days or Hours When You Cannot Work? List	
Have You Ever Worked For Avanti's Before? (Circle Choice) Yes No	When?	Where?
Have You Ever Applied at Avanti's Before? (Circle Choice) Yes No	When?	Where?
Locations You Are Willing to Work At (Circle all That Apply) Rockwood Main Street East Peoria	Who Do You Know Who Works For Avanti's?	

SCHOOL	NAME AND LOCATION	GRADUATE		SUBJECTS STUDIED
		Yes	No	
Grammar School				
High School				
College/University				
Other				

Please list any special skills, knowledge, abilities, experience or attributes that you possess which you feel Avanti's should consider in reaching an employment decision.

Have You Been Convicted of a Felony Within the Past 5 Years? (Please Circle) Yes No
 If Yes, Please Explain: (Will not necessarily exclude you from consideration)

NAME OF REFERENCE	ADDRESS	PHONE	RELATIONSHIP

FORMER EMPLOYERS – List in sequential order starting with the most recent first:

NAME OF EMPLOYER			
ADDRESS		PHONE	
DATE HIRED	DATE LEFT		\$ Per
JOB TITLE		SUPERVISOR'S NAME	
REASON FOR LEAVING			

NAME OF EMPLOYER			
ADDRESS		PHONE	
DATE HIRED	DATE LEFT		\$ Per
JOB TITLE		SUPERVISOR'S NAME	
REASON FOR LEAVING			

NAME OF EMPLOYER			
ADDRESS		PHONE	
DATE HIRED	DATE LEFT		\$ Per
JOB TITLE		SUPERVISOR'S NAME	
REASON FOR LEAVING			

NAME OF EMPLOYER			
ADDRESS		PHONE	
DATE HIRED	DATE LEFT		\$ Per
JOB TITLE		SUPERVISOR'S NAME	
REASON FOR LEAVING			

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, falsified statements on this application shall be grounds for dismissal and I authorize the investigation of all statements contained herein. I authorize the references and employers listed in this application to provide Avanti's with any and all information concerning my previous employment and any other pertinent information, personal or otherwise. I further release Avanti's and all former employers and references from all liability for any damage that may result from use of such information.

I further understand that employment with Avanti's is entered into voluntarily and I am free to resign at will at any time. Similarly, I understand that Avanti's may terminate my employment at will at any time, with or without notice or cause, so long as there is no violation of applicable federal, state or local law or statute.

SIGNED _____ DATE _____