

**SUB CITY – WEST** Corner of Kimball & Ridgeway, Waterloo, Iowa  
**Employment Application**



APPLICANT INFORMATION				
Name (Last, first, middle)				Today's Date
<b>Current Address</b> - Street Address		City	State	Zip
<b>Permanent Address</b> - Street Address		City	State	Zip
Date Available		Hours Desired (check box below): <input type="checkbox"/> Days <input type="checkbox"/> Evenings/Saturdays <input type="checkbox"/> Either		Are you at least 18? YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>				Salary Desired:
Have you ever applied to work for this company before? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?				
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain				
EDUCATION				
High School (Name, City, State)		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree
College (Name, City, State)		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree (or currently attending)
Other—Trade, technical, etc. (Name, City, State)		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree (or currently attending)
PREVIOUS EMPLOYMENT (Start with most recent job first, then work backward)				
Employer name, address (with city & state), ph. number		Reason for leaving		Hire Date (Month and Year):
		Supervisor Name      OK to contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Date Left (Month and Year):
Position/Responsibilities		Starting Pay		Ending Pay
Employer name, address (with city & state), ph. number		Reason for leaving		Hire Date (Month and Year):
		Supervisor Name      OK to contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Date Left (Month and Year):
Position/Responsibilities		Starting Pay		Ending Pay
Employer name, address (with city & state), ph. number		Reason for leaving		Hire Date (Month and Year):
		Supervisor Name      OK to contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Date Left (Month and Year):
Position/Responsibilities		Starting Pay		Ending Pay
Employer name, address (with city & state), ph. number		Reason for leaving		Hire Date (Month and Year):
		Supervisor Name      OK to contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Date Left (Month and Year):
Position/Responsibilities		Starting Pay		Ending Pay

(Please turn over and complete other side)

**REFERENCES** (Please list three persons unrelated to you, not former bosses, whom you have known at least one year)

Name	Address (as complete as possible) & Phone	Business/Relationship to You	Years Known

**GENERAL INFORMATION**

Areas of special study or interest which might benefit you on this job

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Special training

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Special skills

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<u>Military Service</u>	Years of service	Rank at discharge	Honorable discharge? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, explain
Branch of Service:			

How did you hear about this position?

**AUTHORIZATION**

I certify the facts contained in this application are true and complete to the best of my knowledge and understand that, if hired, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed on this application to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

**Do NOT call to check on the status of your application. You will be notified if an interview is desired.**

**Interviewer Notes - Do Not Write Below This Line**


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Name (Please print) \_\_\_\_\_

Please list below any hours you are NOT available to work between 10 a.m. and 10 p.m.\* Acceptable reasons for not being able to work would be: Other job, classes, sports participation, lack of child care, church/religious or other activities, etc. We are willing to work around these types of obligations, but need to know about them before a hiring decision can be made. If you need more room to explain your availability, use the space provided on the lower part of this page. If available to work anytime, write "Open" below, indicating that you have no conflicts and are open to work anytime between 10 a.m. – 10 p.m.

Day	Hours NOT Available to Work	Reason
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Number of hours per week desired: Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

(A typical shift is approximately 5½ – 6½ hours)

\*Our store closes at 10 p.m. However, if you work a night shift you will not get out right at 10:00 because there are tasks that need to be completed after the store closes. Normally, you should be done by 10:30, but it might run a bit later than that on occasion.

If hired, do you plan to keep the job at least six months? (circle one) Yes No

Do you anticipate any significant changes in your availability in the next six months? (circle one) Yes No

If yes, what changes do you expect? \_\_\_\_\_

Please use the space below for anything else you would like us to know about your availability, either now or anticipated in the future (use back of sheet, if necessary).

I certify that the information I provided above is true to the best of my knowledge. I understand my stated availability—and how it fits with the availability of existing employees—is a big factor in the hiring decision and that, if hired, any substantial change in my future availability (especially a reduction in availability) could result in a loss of hours or being replaced by someone with the availability needed to be able to fill out the schedule. I understand this is not for disciplinary reasons, but because a substantial change in my availability might make it impossible to cover all the shifts. Because of this, I agree to give a two-week notice of any substantial change in my availability. Also, I agree to give at least a two-week notice when I decide to leave employment with Sub City. And if I am leaving employment elsewhere to come work at Sub City, I will give my current employer a two-week notice, or provide evidence from them indicating they do not need such notice

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date