Constructive Eating®

Employment Application

First Name _____ Last Name _____

Birthday ____/____/____ Cell Phone Number _____

Month Day Year

I was referred to Constructive Eating by: _____

Why are you interested in working at CE? _____

_____

_____

Describe any former work experience: _____

_____

Number of Hours per Week that you would like to work? _____

Weekdays that you would like to work? ☐ M ☐ T ☐ W ☐ Th ☐ F

Are there any extracurricular activies in which you participate that could influence the hours you work? Please list names of activities and months affected.

_____

_____

Constructive Eating would like to have a reference to contact on the behalf of potential new hires to evaluate work ethic and character. Who could we contact on your behalf? *(This person could be a former employer, teacher, coach, etc.)*

Name _____ Phone Number _____ Relationship _____

Constructive Eating likes to verify that your parent / guardian are aware that you will be working at Constructive Eating. Please have your parent / guardian sign this Application to verify that you have discussed your employment at Constructive Eating with them.

Parent/Guardian Name _____ Date _____

Parent/Guardian Signature _____ Parent/Guardian Contact Number _____

Completed applications may be sent to sburks@constructiveeating.com