



EMPLOYMENT APPLICATION

FAX: 510.483.6855 | EMAIL: info@picnictimeproductions.com

Position Applying For: _____

TODAY'S DATE _____

YOUR EMAIL ADDRESS _____

PERSONAL INFORMATION

NAME _____

STREET ADDRESS _____

CITY _____ ZIP _____

PHONE NUMBER(HOME) _____ (CELL) _____

ARE YOU 18 OR OLDER? YES NO

HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH OUR COMPANY BEFORE? YES NO

EMPLOYMENT HISTORY

PRESENT OR MOST RECENT EMPLOYER: _____

ADDRESS: _____ CITY: _____ STATE: _____

REASON FOR LEAVING: _____ POSITION: _____

EMPLOYMENT DATE: FROM _____ TO _____ PAY RATE: START _____ END _____

SUPERVISOR TO CONTACT: _____ PHONE: _____

ADDITIONAL OR PREVIOUS EMPLOYER: _____

ADDRESS: _____ CITY: _____ STATE: _____

REASON FOR LEAVING: _____ POSITION: _____

EMPLOYMENT DATE: FROM _____ TO _____ PAY RATE: START _____ END _____

SUPERVISOR TO CONTACT: _____ PHONE: _____

ADDITIONAL OR PREVIOUS EMPLOYER: _____

ADDRESS: _____ CITY: _____ STATE: _____

REASON FOR LEAVING: _____ POSITION: _____

EMPLOYMENT DATE: FROM _____ TO _____ PAY RATE: START _____ END _____

SUPERVISOR TO CONTACT: _____ PHONE: _____

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EDUCATIONAL BACKGROUND

NAME OF SCHOOL	LOCATION	GRADUATED		MAJOR/EMPHASIS
HIGH SCHOOL(S)		Yes	No	
COLLEGE(S)		Yes	No	
TECHNICAL COLLEGE(S)/OTHER:		Yes	No	

REFERENCES (not related to you)

NAME	ADDRESS	PHONE OR EMAIL	BUSINESS	YEARS ACQUAINTED

ADDITIONAL INFORMATION

Is there any reason you cannot legally work in the U.S.? Yes No

Do you know anyone currently employed at our company? Yes No If yes, who: _____

Do you have the ability to perform job-related functions as described? Yes No

Do you have a dependable form of transportation? Yes No

IN CASE OF EMERGENCY, NOTIFY: _____

ADDRESS: _____ PHONE: _____

I certify that the information I am presenting in this application is true and correct to the best of my knowledge, and I understand that any falsification or misrepresentation herein could result in my discharge in the event I am employed by Miraglia Catering/Picnic Time Productions. I authorize Miraglia Catering/Picnic Time Productions or its representatives to contact all former employers and references and to further inquire as to any information given by me on the application. If hired, I will be an At-Will employee and understand that my employment can be terminated by either party at any time with or without cause or notice.

YOUR SIGNATURE

DATE