



Seasonal Employment Application

Name _____

Street or PO Box _____

City, State, Zip _____

Phone _____

Email _____

Emergency Contact Name & Phone _____

Do you have a valid Driver's License	Yes	No
	State:	
	Number:	

Name of High School _____

Graduation Year _____

GED _____

Graduation Year _____

Name of College _____

Graduation Year _____

Past or Current Employer(s) - Resume Optional

Employer _____ **Job Title** _____

City & State _____ **Supervisor** _____

Phone # _____

Employer _____ **Job Title** _____

City & State _____ **Supervisor** _____

Phone # _____

References

Name _____ **Phone #** _____ **Relationship** _____

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Name _____ **Phone #** _____ **Relationship** _____

Times Available to Work: You must be available all or minimal from approx. 3-11 PM on Wednesday to be considered. Please use the table below to write the times you are available. If a day does not work, simple write 'X' in the space.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please send the application to:

Micky Zurcher: info@helenabid.com

Or drop application off at HBID office:

318 Fuller Ave.

For Office Use:

Date Applied: _____

Selected for Interview: ___ Yes ___ No

Offer: ___ Yes ___ No *If offered:* Start Date: _____

Schedule: _____

Salary: _____

Comments: _____
