



# APPLICATION FOR EMPLOYMENT

WEBB'S ICE CREAM IS AN EQUAL OPPORTUNITY EMPLOYER. ALL APPLICANTS MUST BE AT LEAST 16 YEARS OLD BY THE SUBMISSION OF APPLICATION. APPLICANTS MUST BE WILLING TO WORK NIGHTS AND WEEKENDS. THIS APPLICATION WILL NOT BE USED FOR LIMITING OR EXCLUDING ANY APPLICANT FROM CONSIDERATION FOR EMPLOYMENT ON A BASIS PROHIBITED BY LOCAL, STATE OR FEDERAL LAW.

**(PLEASE PRINT)**

Date of Application: \_\_\_\_\_ On what date can you start working, if hired? \_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for Webb's? If yes, state name and relationship:  
\_\_\_\_\_

Do you have any obligations that would conflict with working at Webb's? \_\_\_\_\_

## Personal Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Mobile: \_\_\_\_\_  
\_\_\_\_\_

Date Of Birth: \_\_\_\_\_

## Education

High School: \_\_\_\_\_ Did you graduate? Yes No  
(If no, circle one) FRESHMAN SOPHOMORE JUNIOR SENIOR

College: \_\_\_\_\_ Did you graduate? Yes No  
(If no, circle one) FRESHMAN SOPHOMORE JUNIOR SENIOR

## Work History

Employer Name: \_\_\_\_\_ Employer Phone: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ May we contact? Yes No

Direct Supervisors Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
(Please list all other employment experiences on the back)

## References

Please provide one personal and professional reference(s) below:

Name: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Information: \_\_\_\_\_