

House of Bread Employment Application

907-222-1352 ~ HouseofBreadAnchorage@gmail.com

Name: _____ Date: _____

Telephone (____) _____ Email Address: _____

Social Security # _____

Present Address _____
No. Street City State Zip

Permanent Address, where we would potentially send W-2's:

No. Street City State Zip

What Position are you applying for - the baker, assistant baker or retail? _____

How many hours a week do you desire to work? _____

What days and hours are you available for work? _____

Would you be available to work December, 24th _____? When can you start _____

Salary desired: _____ Any vacations planned? _____ If so, when _____

Do you have any friends or relatives working for House of Bread? _____

If yes, state name(s) and relationship(s) _____

Why are you applying for work at House of Bread? _____

If hired, how would you get to and from work? _____ Are you at least 18 years old? _____

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes ___ No ___

If yes, state nature of the crime(s), when and where convicted and disposition of the case(s). _____

Are you currently employed? _____ if so, may we contact your current employer? Yes ___ No ___

Where did you go to High School? _____ Did you graduate? _____

What if any college or culinary school education do you have? _____ -

Major? _____ Date of graduation? _____

Do you have other experience, training, qualifications or skills which make you especially suited for work at House of Bread? If so, please explain. _____

List below all present and past employment starting with your most recent employer.

1. Name of Employer and Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Dates of Employment: From _____ To _____ Salary _____

Reason for Leaving: _____

2. Name of Employer and Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Dates of Employment: From _____ To _____ Salary _____

Reason for Leaving: _____

3. Name of Employer and Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Dates of Employment: From _____ To _____ Salary _____

Reason for Leaving: _____

Which one of the above places of employment did you like the best and why? _____

Which one of the above places of employment did you like the least and why? _____

Date _____ Applicant's Signature _____