

# **APPLICATION FOR EMPLOYMENT**

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

Cakeable is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state, or local law. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Cakeable is happy to provide reasonable accommodations to applicants with disabilities. Please inform the company's personnel representative (hello@wearecakeable.org) if you need assistance completing this application or to otherwise participate in the application process.

#### **GENERAL INFORMATION**

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Full Name:		[	Date:		
FIRST	MIDDLE	LAST			
Address:					
STREET		CITY	STATE	ZIP CODE	
Phone Number:	: Date available to start work:				
Alternate Phone Number: Email:					
Are you legally authorized to work in the United States?  Yes No					
Do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? (If hired, verification will be required consistent with federal law.)					
Are you at least 18 years old? (If no, you may be required to provide authori		No			

# POSITION INFORMATION Please choose only **one** location

I am interested in working in the Cakeable Cafe Vocational Training Program.				
Position applying for: 🛛 🗆 Barista 🖾 Cashier 🗇 I would like to learn both				
How did you learn about the position?				
How many hours per week would you like to work? 🛛 8-12 hrs 🖓 12-16 hrs 🖓 16-20 hrs 🖓 20-24 hrs 🖓 24-28 hrs				
Would you prefer morning or afternoon hours?				
I am interested in working in the Cakeable Bakery Vocational Training Program.				
Position applying for: 🛛 Baker				
How did you learn about the position?				
How many hours per week would you like to work? $\Box$ 2-3 hrs				
Would you prefer morning or afternoon hours?				
Other Cakeable employment opportunities:				
Position applying for: 🛛 Bakery Instruction 🖓 Production Baker 🖓 Cafe Supervisor 🖓 Corporate				
How did you learn about the position?				
How many hours per week would you like to work?				

### EDUCATION

			-	
Type of School	School Name and Location	Number of Years Completed	Diploma, Degree, or Certificate Received	Course of Study or Major
High School or G.E.D. equivalent				
College or University				
Graduate School				
Vocational, Trade or other School				

#### PERSONAL/PROFESSIONAL REFERENCES

List three personal/professional references that we may contact:			
Name:	Phone:		
Email Address:	Type of Acquaintance:		
Name:	Phone:		
Email Address:	Type of Acquaintance:		
Name:	Phone:		
Email Address:	Type of Acquaintance:		

#### **BACKGROUND INFORMATION**

Have you ever been discharged, suspended, If yes, please explain:	or asked to re	esign from any position?	□ Yes	🗆 No	
For the purpose of verifying information on	this applicati	ion, have you ever worked	or attended so	chool under a different n	ame at any
of the organizations you have listed?	🗆 No	Yes			
If yes, specify name:					
Have you ever been convicted of a crime annulled, statutorily eradicated, or dismisse records of conviction or arrest, or expunged If yes, explain:	ed upon cond	dition of probation? You a			
Note: Answering "Yes" does not necessarily preci-	ude you from e	employment as we perform in	dividualized ass	essments for all applicants	

## OTHER WORK-RELATED CERTIFICATIONS, SKILLS, OR EXPERIENCE

Please list any other skills or additional training you have that relate to the position for which you are applying. For example, list any special coursework, licenses, certificates, or special training.

#### **EMPLOYMENT & VOLUNTEER RECORD**

List all employment experience starting with the most recent or present employer, including US military service or training. Applicants must complete this employment record regardless of whether a resume is submitted.

Employer:	Phone:
Geographic Location:	Started: Month Year
Your Position:	Nontri Teal
Supervisor's Name/Title:	Ended: Month Year
Primary Responsibilities:	Reason for Leaving:
Employer:	Phone:
Geographic Location:	Started: Month Year
Your Position:	
Supervisor's Name/Title:	Ended: Month Year
Primary Responsibilities:	Reason for Leaving:
Employer:	Phone:
Geographic Location:	Started:
Your Position:	Month Year
Supervisor's Name/Title:	Ended: Month Year
Primary Responsibilities:	Reason for Leaving:
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#### PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

1. I understand, where permissible under applicable federal, state, or local la background check after receiving a conditional offer of employment to investigate offer is contingent upon the successful completion and outcome of the background disclosure and consent form will be provided to me prior to any background check	my criminal and driving record. Any job d check. I understand that a separate		
2. I understand employment with Cakeable is also contingent on my documentation necessary to establish my identity and eligibility to work in the Uni			
3. I authorize Cakeable and its representatives to contact my current and fo current employer, if I have marked "May we contact?" on page 2 of this application persons or organizations I have named in this application for the purpose of verelease my current and former employers, schools, references, and other persons from any liability resulting from the information released. I authorize employerations named in this application to provide any information or transcripts references.	on as "No"), schools, references, and other erifying the information I have provided. I or organizations named in this application ployers, schools, and other persons or		
4. I certify that all of the above information is true and complete and I understand that any falsification or omission of information made by me may disqualify me from further consideration for employment or, if hired, may result in my termination at any time during the period of my employment, regardless of the amount of time that has passed.			
MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STAT	TEMENTS.		
Applicant's Signature:	Date:		

Return all Applications to: Cakeable PO Box 3548 Matthews, NC 28106 or

hello@wearecakeable.org



AN EQUAL OPPORTUNITY EMPLOYER