



MOO MOO CAR WASH™

Employment Application

Please print in ink, answering all questions

APPLICANT INFORMATION										
Last Name			First			M.I.	Date			
Street Address						Apartment/Unit #				
City			State			ZIP				
Phone			E-mail Address							
Date Available		Social Security No.				Desired Salary				
Position Applied for										
Availability: Part Time <input type="checkbox"/>		Number of Hours		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Full Time <input type="checkbox"/>		Each Week: From								
		To								
Are you 18 or older? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, how old are you? _____										
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>				If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/>			If so, when?							
What prompted you to apply at Moo Moo Car Wash? Newspaper <input type="checkbox"/> Sign <input type="checkbox"/> Friend/Relative <input type="checkbox"/> School placement office <input type="checkbox"/> Moo Moo's Web Site <input type="checkbox"/>										
Current Moo Moo's associate <input type="checkbox"/> (Name _____)										
Do you have reliable transportation to work? YES <input type="checkbox"/> NO <input type="checkbox"/>				Do you have a valid driver's license? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/>			If yes, explain							

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES		
<i>Please list three professional references.</i>		
Full Name	Relationship	Phone ()
Address		
Full Name	Relationship	Phone ()
Address		
Full Name	Relationship	Phone ()
Address		

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date