



BONNIE BRAE ICE CREAM
APPLICATION FOR EMPLOYMENT

- Please complete this application, sign where appropriate, scan
- and then **submit your application to jobs@bonniebraeicecream.com**
- Bonus points if you also send a 15-60 second video of why you want to work at Bonnie Brae Ice Cream

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Date of Birth: _____ Cell Phone: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

EDUCATION RECORD	Name of School	Circle Current Grade
Middle School:		
High School:		9 10 11 12 Graduate
College / University:		

WHAT DAYS/NIGHTS ARE YOU AVAILABLE? WEEKEND AVAILABILITY A MUST.
** (Write time available under day)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Do you possess a current Driver's License? _____ Exp. Date _____

Who referred you to Bonnie Brae Ice Cream? _____

This job exposes you to company money, food and supplies. Have you ever been convicted of a crime other than a misdemeanor in the past 7 years? Yes _____ No _____

If yes, please explain: _____

By signing below, applicant agrees to allow a criminal background report to be performed.

Signature

Signature of parent/guardian if applicant is under 18



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EMPLOYMENT HISTORY: Please indicate any job where you have received an hourly wage (i.e. Babysitting, house sitting, etc.)

Employer	Contact name & phone	Dates of employment	Title/Duties	Reason for leaving

Why do you think you would be qualified to work for Bonnie Brae Ice Cream?

Are you looking to work here long term or short term (summer job only, summer and school year)?

All employees must be vaccinated for COVID in order to work here.

Have you been vaccinated? _____ Please submit the dates of vaccination or your vaccination card.

I understand that if I am hired, any willful misstatements on this form are grounds for my termination...

Signature

Signature of parent/guardian if applicant is under 18