



# Soda Love Employment Application

Please print clearly and complete both sides of this application. Soda Love is an equal opportunity employer. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, age, sex, veteran status, disability, or any other class of individuals protected by law.

**Personal Information**

Date:	Position applying for:	Available start date:
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Last Name:	First Name:	Middle Name:
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Current Address:

City:	State:	Zip Code:
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Permanent Address (if different from above address):

Email address:

Social Security #:	Date of Birth:	Phone #:
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How were you referred to Soda Love?  Current Employee (list name): \_\_\_\_\_  Walk In  Friend  Instagram  
 Facebook  Career website: \_\_\_\_\_  Other (list source): \_\_\_\_\_

Do you have any family members currently employed by Soda Love?: Yes  No  If yes, list names & locations:

**Please fill in the hours you are available and not available to work each day. i.e. 3pm-10pm.**

Avaliability	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Number of hours per week wanted?	
Available							CLOSED		
Not Available							CLOSED		

I am interested in (check all that apply):  Full Time  Part Time  Temporary  Seasonal

Indicate shifts you prefer:  Morning (7a-10a)  Mid Day (10a-2p)  
 Afternoon (2p-6p)  Late (6p-11p)

**Education**

School Name	Location	Years attended	Diploma/Degree/Major
		1 2 3 4 __	
		1 2 3 4 __	
		1 2 3 4 __	

Other certifications/ trainings:

Have you ever worked or attended school under a different name?: Yes  No  If yes, name:

Have you ever been convicted for a crime other than a major traffic violation?: Yes  No  If Yes, Explain:

What school activities/ organizations/ sports/ hobbies are you involved in?:

What do your friends and family say are your best traits?:

**Employment: List most recent employment first. Include summer & temporary jobs or military services. Use an extra page if needed.**

Business Name & Address:	Position Title/Duties Skills:		Reason for leaving:	
	Supervisor Name:	Phone number:	Start (MO/YR):	End (MO/YR):
Business Name & Address:	Position Title/Duties Skills:		Reason for leaving:	
	Supervisor Name:	Phone number:	Start (MO/YR):	End (MO/YR):
Business Name & Address:	Position Title/Duties Skills:		Reason for leaving:	
	Supervisor Name:	Phone number:	Start (MO/YR):	End (MO/YR):
Business Name & Address:	Position Title/Duties Skills:		Reason for leaving:	
	Supervisor Name:	Phone number:	Start (MO/YR):	End (MO/YR):

Are you currently employed?: Yes  No  If yes, may we contact your current employer?: Yes  No

Are there any previous employers you do not wish Soda Love to contact? If so, list them here:

**References: List 2 personal or professional references who are not relatives or former supervisors.**

Name	Phone number	Occupation	Relationship	Years known

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK ABOUT THEM BEFORE YOU SIGN.**

I certify that the information stated in this application is correct and accurate to the best of my knowledge. I authorize investigation of all statements contained in this application and any attachment provided by me. I understand that any misrepresentation or omission of facts in this application disqualifies me from further consideration - or if employed - is grounds for dismissal. I understand that this application is only valid for the position applied for and Soda Love is not obligated to retain or consider this application for future openings. Applications are active for 30 days.

I authorize Soda Love to investigate past employment, education history, as well as references given on this application. If employed by Soda Love, I agree to abide by company policies, rules and standards of conduct. Soda Love retains sole discretion regarding the following types and terms and conditions of employment - promotion, demotion, transfers, work assignments, job duties/responsibilities, wage rates and benefits - or any other terms and conditions that Soda Love may determine to be necessary for the operation of its business. I understand and accept these as conditions of my employment. If I am employed by Soda Love, I understand my employment is at-will and can be terminated, with or without cause and with or without notice, at any time by Soda Love or myself.

My signature below certifies that I agree to be bound by the terms and conditions stated on this application. I understand that this application is not a contract of employment.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date