•	/ [1	ialra	Torre	Laren
V	/I e I	icks	Town	Harm

PO Box 73 Oldwick, NJ 08858 Phone: (908)229-3744 (Rebecca Melick's cell) Date of application

Fax: (908)439-3888

Employment Application

Full Name: Phone:				
When is it best to reach you?				
Address:				
Currently attending school? Will you be going away to college in the fall?				
Current: High School College School Name				
Are you over 18 ?				
Have you ever been convicted of any violations of law? If yes, please explain				
Work Experience, please list previous two employers:				
Employer Dates Employed Contact Phone Contact				
Duties:				
Employer Dates Employed May we contact your previous employer? Phone Contact				
Duties:				
What type of work are you looking for?				
What is your availability to work?				
Time of Day/ Day of Week / Month of Year (through at least October)				
Do you have any physical limitations to prevent you from lifting up to 40 lbs?				
Do you now or will you have activities that would restrict work hours through Oct?(eg sports, camp, vacation, another job, school play, going away to college, too much homework)				

Drug test may be required for employment.