



## J.J. Gourmet Food Corporation

928 Ajax Ave., City of Industry, CA 91748

Phone 626-965-5088 Fax 626-965-4767

### EMPLOYMENT APPLICATION

#### PERSONAL INFORMATION:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Are you eligible to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you 18 year old or over Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted of a felony within the last five years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Do you have friends or family work in the company? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the name of the associate who currently work with the company: \_\_\_\_\_

#### POSITION/AVAILABILITY:

Position Applied For \_\_\_\_\_ Desired Pay \$ \_\_\_\_\_/hr

Availability: Filled in Time in the blank

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time Availability (6:00am-12:00am)							

What date are you available to start work? \_\_\_\_\_

Can you provide food-handler card if you are hired? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to relocate? Yes \_\_\_\_\_ No \_\_\_\_\_

**EDUCATION:**

High School Name				
City		State		
Month/Year Graduated (MM/YY)		GED Degree	Yes_____	No_____

College Name			
City		State	
Month/Year Graduated (MM/YY)		Major of Study /Degree	

College Name			
City		State	
Month/Year Graduated (MM/YY)		Major of Study /Degree	

Skills and Qualifications: Licenses, Skills, Training, Awards

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Language proficiency other than English (Level 1-10 )

Language\_\_\_\_\_Read\_\_\_\_\_Write\_\_\_\_\_Listen\_\_\_\_\_

Language\_\_\_\_\_Read\_\_\_\_\_Write\_\_\_\_\_Listen\_\_\_\_\_

Language\_\_\_\_\_Read\_\_\_\_\_Write\_\_\_\_\_Listen\_\_\_\_\_

**EMPLOYMENT HISTORY** (From most current one to the oldest)

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Salary: \$\_\_\_\_\_/hr

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Salary: \$\_\_\_\_\_/hr

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Salary: \$\_\_\_\_\_/hr

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**May We Contact Your Present Employer?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Please list out three professional References:**

Name/Title	Address	Phone Number

I certify that information contained in this application is true, correct and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature\_\_\_\_\_

Date\_\_\_\_\_

**Please send complete application via fax 626-965-6996 or via email [Hiring@jjbakeryusa.com](mailto:Hiring@jjbakeryusa.com)**