

# CHAMPAGNE'S MARKET

454 HEYMANN BLVD  
LAFAYETTE, LA 70503  
337-235-4114



APPLICANT INFORMATION				TODAY'S DATE:			
Last Name		First		M.I.		D.O.B.	
Street Address				Apartment/Unit #			
City			State		ZIP		
Phone			E-mail Address				
Date Available			Social Security No.			Desired Salary	
Position Applied for							
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?				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				

EDUCATION							
High School				City, State			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College/Other				City, State			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<b>PLEASE LIST CURRENT SCHOOL SCHEDULE, IF APPLICABLE:</b>							
_____							
_____							
_____							
_____							

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

RESTRICTIONS: Please list any restrictions that may interfere with your work schedule.
_____
_____

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

MANAGER NOTES:
_____
_____
_____