2015 Loading Dock Application for Employment
Mail to: the Loading Dock, P.O. Box 458, Grafton, IL 62037 or loadingdock@gtec.com

Date												
Name												
Address												
City		State				Zip						
Cell Phone	Home	me Phone E-mail										
Date of Birth	·	Date available to start work										
	Please	circle Yes or	No belo	W								
Have you ever been convicted of a felony?							Yes			No		
Are you 21 or older?							Yes			No		
Are you 19 or older?							Yes			No		
Is this your first job?							Yes			No		
Have you ever worked in food service?							Yes			No		
Do you have transportation?							Yes		No			
Do you have a valid drivers license?							Yes		No			
Do You have your own car?							Yes		No			
Do you attend school?							Yes			No		
Where?												
Do you attend summer school?							Yes		No			
Are you Shy?							Yes		No			
Are you talkative?							Yes		No			
Do you enjoy physical activity?						Yes			No			
		T		Ι.,								
Would you pre		Independ			Vitr	CUS	itor	ne	rs			
11		one for the t			10					10		
How many hours per week would you like to work? 10 20						:0	3	U	40			
How many days per week would you like to work? 2						3	4	-	5	6		
Are you seeking	Summer job Per			mc	nanent job							
	Please circle th	ne position(s)	that inte	eres	t yc	ou:						
Bartender	Server	Food Cook Caterin					ring	<u> </u>				
(must be 21)	(Must be 20)	Server				(On site)						
							Claria al					
Maintenance	Landscaping	Janitorial	Special Event Clerical Management									
			i managi	CITIC	111							
If someone refe	erred you to us,	who?										

Education											
High school						GPA					
Extracurricular						1					
Activities											
College			Maj	or		Degree					
			Year	s Attende	.d						
				Anticipated Graduation							
College				Major Degree							
College											
				Years Attended Anticipated Craduation							
Anticipated Graduation Work Experience											
Work Experience											
Employer				Position							
Supervisor + Phone Number				Years worked							
Reason for leaving:											
· ·											
Employer				Position							
Supervisor + Phone Number				Years worked							
Reason for leaving:											
Because we are seasonal, our staffing requirements vary throughout the year. Your availability is critical to your employment.											
What specific activities will interfere with your work schedule? (Vacations, School Functions, Weddings, Summer School)											
Please circle all date ranges that you will be available to work:											
r icase circle all adi	crange	3 IIIGI ye	70 WIII 5	<u>c avana</u>		, work.					
March 1 – 31	April	1 – 25	Apr	il 26 – May	18	May 19 – August 10					
August 12 – Sept 30	Octobe	er 1 – 26	Oc	Oct 27 – Nov 15							
Please indicate by	month w	hat day	'S VOU W	ill be av	ailabl	e to work:					
March	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
April	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
May	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
June	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
July	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
August	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
September	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
October	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.				
		1	Wed.		Fri.	Sat.					
November	Mon.	Tues.	rveu.	Thurs.	1111.	J SUI.	Sun.				
Signature:											