

**EMPLOYMENT APPLICATION**  
**WALDO'S & COMPANY**

17 Lincoln Sq BSMT, Gettysburg, PA 17325

I. PERSONAL INFORMATION			
Last Name	First Name	Middle Name	Date (DD-MM-YYYY)
Street Address			Home Phone
City	State	Zip	Cell Phone
Are you a current Waldo's volunteer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you authorized to work in the USA? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able to be on your feet for 8 hours and lift up to 50 lbs? <input type="checkbox"/> Yes <input type="checkbox"/> No	

II. EMPLOYMENT INTERESTS	
Position Desired:	Date Available:
<b>Type of Employment Desired:</b> Regular <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/>	Availability: (Check all that apply) <input type="checkbox"/> Wed 10a-4p <input type="checkbox"/> Thurs 10a-4p <input type="checkbox"/> Fri 10a-4p <input type="checkbox"/> Sat 8a-2p <input type="checkbox"/> Sun 4p-10p <input type="checkbox"/> Wed 4p-10p <input type="checkbox"/> Thurs 4p-10p <input type="checkbox"/> Fri 4p-10p <input type="checkbox"/> Sat 2p-10p

III. EDUCATION INFORMATION				
School Level	Name and Location of School	Course of Study	Did you graduate?	Certificate or Degree Earned
High School			<input type="checkbox"/> Y <input type="checkbox"/> N	
College/University			<input type="checkbox"/> Y <input type="checkbox"/> N	
Post-Graduate			<input type="checkbox"/> Y <input type="checkbox"/> N	
Business/Trade Technical			<input type="checkbox"/> Y <input type="checkbox"/> N	

IV. REFERENCES (List up to three)			
Name of Reference	Title and Company	Phone Number	Your Work Relationship with this Person

**V. EMPLOYMENT INFORMATION (Begin with current or most recent employer)**

1	Company Name				From Month/Year	To Month/Year
	Street Address	City	State	Zip	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Company Name				From Month/Year	To Month/Year
	Street Address	City	State	Zip	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Company Name				From Month/Year	To Month/Year
	Street Address	City	State	Zip	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Other Applicable Skills (barista, art, non-profit experience):**

**Describe Waldo's Mission in a few sentences.**

**VI. ACKNOWLEDGMENT**

Waldo's and Company does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in any of its activities or operations. We are committed to providing an inclusive and welcoming environment for all of our staff, volunteers, artists, and community members.

I hereby certify that I have not withheld or misstated any material facts that might adversely affect my application for employment and that the answers given by me are true and correct. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application, or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

**Applicant's Signature:**

**Date:**