

origin or handicap.

DATE	

EMPLOYMENT APPLICATION

NAME			SO	C. SEC. N	O			_TEL. NO		
ADDRESS				CIT	Y & ST	ATE				
HIGH SCHOOL				cc	COLLEGE					
CITY & STATE				CIT	CITY & STATE					
					LAST YEAR COMPLETED					
			RECORD (L							
NAME AND ADDRESS OF COMPANY				DATE - FROM	M TYPE WORK SALA		NAME OF SUPERVISOR		REASON FOR LEAVING	
	W 300 5									
	Δ\/	All ARILITY - S	TATE ALL HOU	RS YOU WILL	BE ABLET	O WORK IN C	HART	BELOW		
	MONDAY TUESDAY WEDNE						TURDAY SUNDAY CHECK ONE		CHECK ONE	
FROM									□ FULL TIME	
то									□ PART TIME	
n answering the	following question	s. vou mav om	PAPERS OR A C	n or answer "n	o record" w	ith regard to an	ny conv	viction for which	there is a sealed record	
on file. You should also omit first convictions for drunkenness, simple assa 1. Have you ever been convicted of a felony? Ye					l .	No 🔲				
2. Have you been convicted of a misdemeanor in the last five years? Yes						No 🔲	If yes, give details and date.			
	tizen or otherwise bility will be requir			? Yes	1	No 🔲				
cause for dismissal	n my application for a I agree that all indivi uniform requirements	duals supplying it	nformation about n	ne, for reference	ourposes, ar	e released from li	ability. If	a job opportunity	shall be considered sufficier is offered, I shall comply wit	
Unless box bel	ow is checked, t	his is an inde	pendently own	ed and opera	ated FRA	NCHISE of the	e DUN	NKIN' DONUT	S SYSTEM.	
Company	Operated Shop)								