

GOOZELL LLC – EMPLOYMENT APPLICATION



We are excited about your interest in working with Goozell LLC. Please complete and return the application below for consideration. Goozell promotes a fun and safe work environment. © 2014 Goozell™ Goozell Yogurt & Coffee™

APPLICANT INFORMATION									
Last Name				First			M.I.	Date	
Street Address						Apartment/Unit #			
City				State			ZIP		
Phone				E-mail Address					
Date Available			Social Security No.				Position Applied for		
Desired hours / week? (min hrs – max hrs)			Desired Salary (\$ Goal/Month)						
Are you a citizen of the United States?		YES ___ NO ___		If no, are you authorized to work in the U.S.?			YES ___ NO ___		
Do you have a valid Driver’s License?		YES ___ NO ___		Do you have your own transportation?			YES ___	NO ___	
Have you ever been convicted of a felony?		YES ___ NO ___		If yes, explain					
EDUCATION									
High School				Address					
From (mo/yr)	To	Did you graduate?		YES ___ NO ___		Degree/ GPA out of			
College				Address					
From	To	Did you graduate?		YES ___ NO ___		Degree/ GPA out of			
Other				Address					
From	To	Did you graduate?		YES ___ NO ___		Degree/ GPA out of			
REFERENCES									
<i>Please list professional references.</i>									
Full Name					Relationship				
Company					Phone				
Address									
Full Name					Relationship				
Company					Phone				
Address									
AVAILABILITY: Please list current and future (ie- school), including dates, days of week & hours of availability									

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 ___ NO ___			
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 ___ NO ___			
OTHER ACTIVIES/COMMENTS <i>(let us know a little more about your interests/goals)</i>			
MILITARY SERVICE if any			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
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.			If under 18, Date of Birth (must be 16 or older):
Signature		Date	
If under 18, Parent/ Guardian name		Parent/Guardian Phone	
Parent/Guardian Signature		Date	

Email applications to: hr@goozell.com

or mail/deliver to GOOZELL LLC at 1200 Washington Ave, Golden, CO 80401
(If you choose to hand deliver, please also email a copy to hr@goozell.com ; Thank you!)