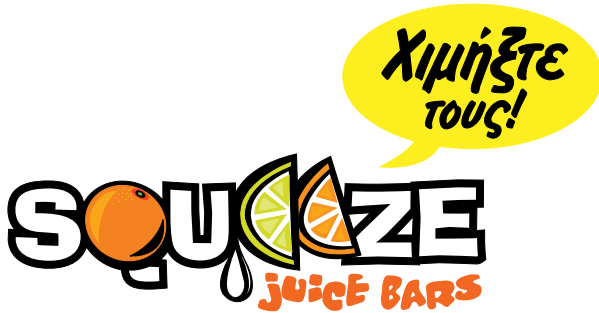


Office Use Only:



Staff Application Form

*incomplete applications will not be considered

Squeeze Juice Bars Staff Application Form

POSITION APPLIED FOR:

Store Manager Assistant Manager Store Supervisor Team Member

WORK TYPE:

Full-time Part-time Casual

LOCATION:

LEFKOSIA - 229 Ledras St - T: 22 66 60 36
 LEMESSOS - Fasouri Watermania WaterPark
 LARNACA - Finikoudes (opening soon)

Days/hours available to work

No Pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

When are you available for work? _____

1. PERSONAL DETAILS:

Name

Mr/Mrs/Miss _____

surname

first names

Date of birth _____

Address

Postal Address _____

Phone

Home () _____

Work () _____

Mobile () _____

Fax () _____

Email _____

2. NEXT OF KIN (Person to notify in case of emergency)

Name _____

Relationship _____

Address _____

Home Phone () _____

Work Phone () _____

Squeeze Juice Bars Staff Application Form

3. EDUCATION:

a) Secondary Schooling

Full name and place

Dates from _____ to _____

Examinations:

Junior Certificate: Date _____

Subjects and results:

University Entrance or Senior Certificate

Full name and place

Dates from _____ to _____

If accredited state: _____

Subjects and results:

Give any other relevant details about your school career (prizes, distinctions etc.)

(b) Tertiary Education (University, TAFE, College, etc.)

(i) Full name and place

Dates from _____ to _____

Qualifications gained/expected/passed/failed/uncompleted

(ii) Full name and place

Dates from _____ to _____

Qualifications gained/expected/passed/failed/uncompleted

If you did not complete any course started, explain.

Are you involved in any other study or training at the moment?

NOTE: Please supply copies of all supporting documents, e.g. diplomas, degrees certificates.

Squeeze Juice Bars Staff Application Form

3. WORK EXPERIENCE

Please complete, even if attaching your curriculum vitae/resumé. Starting with your present or last job, an working backwards list your past four employers.

Employer	Date Employed From To	Work Performed
Address		
Phone No		
Job Title		
Reason for Leaving		

Employer	Date Employed From To	Work Performed
Address		
Phone No		
Job Title		
Reason for Leaving		

Employer	Date Employed From To	Work Performed
Address		
Phone No		
Job Title		
Reason for Leaving		

Employer	Date Employed From To	Work Performed
Address		
Phone No		
Job Title		
Reason for Leaving		

Squeeze Juice Bars Staff Application Form

5. SECONDARY SKILLS

List any other skills you have acquired (apart from those required by your employment) such as metal work, photography, typing, first aid, speech making, creative writing, counselling etc. Indicate your proficiency.

6. HEALTH

Any re-occurring health or mental problems.

7. CONVICTIONS

Have you ever been convicted by a court or any other law enforcement authority?
(Other than minor traffic offences)

Yes No

If **YES** give brief details in a separate envelope marked "Legal, Confidential".

N.B. A previous conviction will not necessarily disqualify you in this application.

8. INTERESTS

What leisure-time activities or interests do you have? Give details.

Are you, or have you ever been an active member of any organization, committee, society etc.?
List and indicate degree of participation and responsibility.

Do you have a driver's license? Yes No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____

Expiration date _____

Have you had any accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How many? _____

Squeeze Juice Bars Staff Application Form

9. REFEREES

Please nominate THREE people other than close relatives whom Squeeze Juice Bars may ask for a reference. Preferably at least one should be an employer or someone who has worked with you a person who has known you well for a long time.

(1) Name _____

Relationship to applicant _____

Address _____

Home () _____

Work () _____

Mobile () _____

Fax () _____

Email _____

(2) Name _____

Relationship to applicant _____

Address _____

Home () _____

Work () _____

Mobile () _____

Fax () _____

Email _____

(3) Name _____

Relationship to applicant _____

Address _____

Home () _____

Work () _____

Mobile () _____

Fax () _____

Email _____

Squeeze Juice Bars Staff Application Form

FURTHER INFORMATION

The completed form should be returned to:

Staff Recruitment Manager
Squeeze Juice Bars
229 Ledras St,
LEFKOSIA
T: 22 66 60 36

SIGNATURE

I understand that, if I am employed, I will be liable to dismissal if any of the statements in my application are found to be deliberately misleading.

Signature _____

Date _____

All personal information being collected will be dealt with in accordance with the Privacy and Personal Information Protection Act 1998.