

## ST. VINCENT DE PAUL GREEN BAY STORE EMPLOYMENT APPLICATION 1529 Leo Frigo Way Green Bay, WI 54302

Phone: (920) 435-4040 | Email: info@svdpgb.org

Name:				Date:	
First	Middle Initial		Last		
Address:					
Street		City	State	Zip Code	
Preferred Phone # 1:			Alternate Phone	#2:	
E-mail address:					
If you are under 18 year	ırs of age, please state d	ate of birth:			
Position Desired:			Salary requirement?		
Location: East sto	ore West Store	Dig & Save	Any		
Which type of employs	ment are you seeking?	Part time:	Full time:	Either:	
If required for the position, do you have a valid driver's license? Yes: No:					
If yes, State of issuance	e, license #, and expirat	ion date:			
Have you ever been con	nvicted or plead guilty of	or no contest to	a misdemeanor or	felony or other offense or civil	
forfeiture? Yes:	No: If ye	s, please explai	n:		
(NOTE: A conviction is not an auto	omatic bar to employment except a	s it may substantially re	elate to the job to which you	are applying.)	
Highest level of educat	tion completed:		Where		
inglest level of educat	non completed.		where		
Degrees:			Majors:		
Are you currently atter	nding school? Yes:	No:	Where:		
REFERENCES: Give to	the names of 3 persons no	ot related to you,	whom you have kn	own at least 3 years.	
Name		Email		Phone Number	
#1					
#1					
#2					
#3					

## **EMPLOYMENT HISTORY**

## MOST RECENT EMPLOYER Name of Company: Address: City: State: Supervisor's Name: Phone #: Employment Dates (month & year) From: \_\_\_\_\_ To: \_\_\_\_ Position Title: Reason for leaving: NEXT RECENT EMPLOYER Name of Company: Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Employment Dates (month & year) From: \_\_\_\_\_ To: \_\_\_\_ Position Title: Reason for leaving: NEXT RECENT EMPLOYER Name of Company: Address: \_\_\_\_ City: \_\_\_\_ State: \_\_\_\_ Phone #: Supervisor's Name: \_\_\_\_ Employment Dates (month & year) From: \_\_\_\_\_ To: \_\_\_\_ Position Title: Reason for leaving: NEXT RECENT EMPLOYER Name of Company: Address: \_\_\_\_\_ City: \_\_\_\_ State: \_\_\_\_ Supervisor's Name: \_\_\_\_\_\_ Phone #: \_\_\_\_\_ Employment Dates (month & year) From: To: Position Title: \_\_\_\_ Reason for leaving: