

## Yorktown JAA Café **Concession Stand Application 2024**

APPLICANT INF	ORMATION					
First Name:		Your Cell #:				
Last Name:		Male or Female:				
Address:		Your Email:				
City:		Parent Cell:				
State & Zip:		Parent Email:				
Age:		Shirt Size: Circle one	XS S	M L	XL XXL	
Date of Birth:		Food allergies?	No or Ye	S		
What school do	you attend?	_				
Do you play sp	orts? If yes, what sport(s)?					
PREVIOUS WO	RK EXPERIENCE					
Please provide the	following information for any jobs yo	ou have held in the past	three years.			
EMPLOYER	ADDRESS	SUPERVISOR		PHONE		
WHY DO YOU \	WANT TO WORK IN THE JAA CA	AFÉ?				
WHO REFERRE	D VOL13					<del></del>
EMERGENCY Construction	Phone:		Relationshi	n:		
SIGNATURE	Filone.		Relationsin	μ.		
	submit or sign this application	if you cannot work	2 days du	ring the we	ek and at	
least 1 day on		n you cannot work	<u> z uays uu</u>	ing the we	ck and at	
Applicant Signatu						
	(for applicant under age of 18):					<del></del>
Tarent Signature	(10) applicant under age of 10).					
Parents: If you child	d is 16 or 17, would you be willing to sig	n a permission form allow	ving child to v	work longer hou	urs?	
Please Cirlce: Yes		, . ,	<b>G</b>			
SUBMISSION						
	nd email this application to: york	townjaacafe@gmail.	com or give	e to Kerri		
Notes:						
-	none interview that will last 10-15 minu					
	4:30p-8:30p. Sat & Sun 8:30a-7p (2 diffe	·				
	IpMe, Google Calendar and Google She	•	•			
	s from April 26 through the beginning of		la.			Ear Varri
o. Tou are required	to work 2 shifts during the week and a	t least i shift on weekend	15.			For Kerri: GroupMe
					_	G. Calendar
						G. Sheets
Questions? Call	or text Kerri at 765-744-8552	Thank you fo	or applying	to work at th	_	