



Application For Employment

Marianne's Ice Cream, LLC Is an EEO/AA Employer

Date of Application:

Personal Information

Full Name:		
Address:		
City:	State:	Zip Code:
Cell Phone:	Email:	

Answer the following questions in your application email:

1. Why would you like to work for Mariannes Ice Cream?
2. What do you like most about Ice cream?
3. What Is your favorite flavor of Ice cream?
4. What animal best describes you, and why?
5. How do you find the fun each day?

Position Information & Availability

Position Applying For:	Desired Location (If Retail): <input type="radio"/> Westside <input type="radio"/> Downtown <input type="radio"/> Capitola <input type="radio"/> Aptos
How did you hear about us?:	
Employee Referral Name:	
Are you 18 or older: <input type="radio"/> Yes <input type="radio"/> No	Known Food Allergies? If so, what allergies?:

PLEASE PROVIDE SCHEDULE AVAILABILITY (between 5am - midnight):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

In accordance with the federal Immigration and Reform Act of 1986, if you are employed by us you will be asked to provide documentation of your right to work in the United States. If you cannot provide such documentation, we cannot legally employ you. Can you provide such documentation?

Yes No

We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?

Yes No

If no, please describe the functions that cannot be performed or accommodations needed:

Send application, resume, and cover letter via email to apply@mariannesicecream.com with subject line formatted as such: Application, Desired Location, Position, First & Last Name, Date Applied

Important: Applications with subject lines that do not follow the above format will not be viewed or responded to.

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Educational Background

	Name / Location	Major / Area of Study	Year of Graduate
High School / GED			
College / University			
Graduate / Masters			

Employment History

Job Title:		Employer:	
Dates of Employment:		Type of Business:	
Supervisor Name & Title:		Contact Information:	
May we Contact? <input type="radio"/> Yes <input type="radio"/> No	Summary of Duties & Responsibilities:		

Job Title:		Employer:	
Dates of Employment:		Type of Business:	
Supervisor Name & Title:		Contact Information:	
May we Contact? <input type="radio"/> Yes <input type="radio"/> No	Summary of Duties & Responsibilities:		

Job Title:		Employer:	
Dates of Employment:		Type of Business:	
Supervisor Name & Title:		Contact Information:	
May we Contact? <input type="radio"/> Yes <input type="radio"/> No	Summary of Duties & Responsibilities:		

I certify that all information on this application is true, accurate and complete. I understand that falsification, misrepresentation or omission of fact on this application (or any accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. I authorize Marianne's Ice Cream LLC to contact references and confirm the validity of this information. Questions regarding the above statement should be directed to any employment interviewer prior to signing the application.

If hired, I agree to abide by all of the policies and procedures of the organization. This application and the organization's policies do not create an employment contract. I understand that either party may terminate employment at any time, with or without cause.

Signature of Applicant _____

Date: _____

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