| **Application For Employment** | | | | | | | | Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume. | | | Where’s The Scoop? (WTS) is an Equal Opportunity Employer and is committed to excellence through diversity.  WTS complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
| **Personal Information** | | | | | | | | | | | | | |
| Name | | |  | | | |  |  | | |  | | |
|  | | | | | | | | | | | | | |
| Address | | |  | | | | City | | | State | Zip | | |
|  | | | | | | |  | | |  |  | | |
| Phone Number | | | Mobile Number | | | | Email Address | | |  |  | | |
|  | | |  | | | |  | | | | | | |
| Are You Eligible To Work In U.S (Citizen or EAD/Work Permit)? | | | | | | | Have You Ever Been Convicted Of A Criminal Offense (Misdemeanor or Felony)? | | | | | | |
| Yes ☐ | | No ☐ | | | | | Yes ☐ | | | No ☐ |  | | |
|  | | | | | | | | | | | | | |
| **Position** | | | | | | | | | | | | | |
| Position You Are Applying For | | | | | | | Available Start Date | | | End Date (If Applicable) | | | |
|  | | | | | | |  | | |  | | | |
| Employment Desired | | |  | | | |  |  | |  | | | |
|  | |  | ☐ Full Time | |  | | ☐ Part Time | | | ☐ Seasonal/Temporary | | |
|  | | | | | | | | | | | | | |
| **Shift Availability** | | | | | | | | | | | | | |
|  | Monday | | | Tuesday | | Wednesday | | Thursday | Friday | | Saturday | Sunday | |
| From |  | | |  | |  | |  |  | |  |  | |
| To |  | | |  | |  | |  |  | |  |  | |
|  | | | | | | | | | | | | | |
| **Education (Most Recent) - Mark N/A, if this section does not apply** | | | | | | | | | | | | | |
| School Name | | | | Location | | | Years Attended | Major (If Applicable) | | | Status (Present or Graduated) | | |
|  | | | |  | | |  |  | | |  | | |
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|  | | | |  | | |  |  | | |  | | |
| **[** | | | | | | | | | | | | | |
| **References – Please provide at least one (professional or personal)** | | | | | | | | | | | | | |
| Name | | | | | | | Relationship | Company (If Applicable) | | | Phone | | |
|  | | | | | | |  |  | | |  | | |
|  | | | | | | |  |  | | |  | | |
| **Employment History – Mark N/A, if this section does not apply** | | | | | | | | | | | | | |
| **Employer (1)** | | |  | | | | Job Title |  | | | Dates Employed | | |
|  | | | | | | |  | | | |  | | |
| Work Phone | | |  | | | | Starting Pay Rate |  | | | Ending Pay Rate | | |
|  | | | | | | |  | | | |  | | |
| Address | | |  | | | | City | State | | | Zip | | |
|  | | | | | | |  |  | | |  | | |
| **Employer (2)** | | |  | | | | Job Title |  | | | Dates Employed | | |
|  | | | | | | |  | | | |  | | |
| Work Phone | | |  | | | | Starting Pay Rate |  | | | Ending Pay Rate | | |
|  | | | | | | |  | | | |  | | |
| Address | | |  | | | | City | State | | | Zip | | |
|  | | | | | | |  |  | | |  | | |
|  | | | | | | | | | | | | | |
| **Signature Disclaimer** | | | | | | | | | | | | | |
| By signing below, I understand that the relationship between myself and Where's The Scoop? is referred to as "employment at will." This means that my employment can be terminated at any time for any reason, with or without cause, with or without notice, by myself or Where's The Scoop?. No representative of Where's The Scoop? has authority to enter into any agreement contrary to the foregoing "employment at will" relationship except for a written statement signed by myself and either the Chief Operations Officer or the Company's President.  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. I understand that employment at WTS may be subject to a background check. | | | | | | | | | | | | | |
| Name (Please Print) | | |  | | | | Signature | | | | | | |
|  | | | | | | |  | | | | | | |
| Date | | |  | | | |
|  | | | | | | |

**If you were referred by someone, let us know. Who referred you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Drop off completed application or email to: contact@wheresthescoop.com**