



OPPORTUNITY

TO BE AN EMPLOYEE WITH US.

(919) 520-7748 • Apply@BuoyBowls.com

APPLICATION 1/2

Position applied for:

First Name:

Last Name:

Address 1:

Address 2:

Email:

Phone:

For compliance of the Working Time Directive, we would appreciate if you would indicate witch age bracket you fall into: Under 16 16 - 17 18+

How many hours are you looking to work? 0 - 16 16 - 20 20 - 35 35+

How long would you like to work at Buoy Bowls?
3 months 6 months 1 year + Other / Seasonal Work

When are you available to work?

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
From: (time)							
To: (time)							

Tell us 3 top qualities you have that will make you a great fit for Buoy Bowls.

Why did you choose to apply for a position at Buoy Bowls?



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APPLICATION 2/2

What have you been studying? (List the last 2 places of education / training, starting with the current or most recent.)

1	Name of school or college:	Area of Study:
2	Name of school or college:	Area of Study:

What have you been up to? (List your last 2 employers, starting with the current or most recent.)

1	Name of employer:	Position:	Rate of Pay:	Dates of employment:
Duties:				
Reason for leaving:				
Manager's Name:		Phone Number:		Email:
2	Name of employer:	Position:	Rate of Pay:	Dates of employment:
Duties:				
Reason for leaving:				
Manager's Name:		Phone Number:		Email:

Who will vouch for you? (Give us the names of 2 people, not related to you, that we can contact to provide a reference for you. At least one should be work related. If this is your first job, it can be a teacher.)

1	Name:	Phone Number:	Email:	How do you know this person?
2	Name:	Phone Number:	Email:	How do you know this person?

I CERTIFY THAT I HAVE READ AND FULLY COMPLETED BOTH PAGES OF THIS APPLICATION AND THAT THE INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY OMISSION OR FALSE INFORMATION IS GROUNDS FOR DISMISSAL. I AUTHORIZE THE REFERENCES LISTED ON THIS APPLICATION TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE.

Full Name:

Date:

(May be signed or typed)