

for the franchise location on 8099 Main St | Email application to PelicansWoodstock@gmail.com

|                              |   |           |           |          |            |                | THE E                                       | BASICS                  |           |                    |                 |          |               |        |         |
|------------------------------|---|-----------|-----------|----------|------------|----------------|---|-------------------------|-----------|--------------------|-----------------|----------|---------------|--------|---------|
| NAME (print): Last           |   |           |           |          |            | Middle I First |   |                         |           | Date               |                 |          |               |        |         |
| CURRENT ADDRESS:             |   |           |           |          |            | City           |   |                         | State Zip |                    |                 |          |               |        |         |
| PHONE NUMBERS: Cell          |   |           |           |          |            | Home           |   |                         |           |                    |                 |          |               |        |         |
| E-MAIL: _                    |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
| DO YOU I                     | HAVE RE   | ELIABLE   | TRANS     | PORTAT   | FION?      | ΟY             | es O N                                      | 0                       | Wha       | at wage o          | do you          | expect?  |               |        |         |
| lf you are                   | under   | 18 years  | s old, he | ow old a | are you    | ?              |   | _ Are yo                | ou eligib | ole to wo          | ork in th       | ne USA?  | С             | Yes C  | ) No    |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         | y<br>SUN  | MON                | THE             | WED      | <b>T</b> 1111 | FRI    | CAT     |
| Max hou                      |   |           |           |          |            |                |   | FROM                    | 3011      | WON                | TUE             | WED      | по            | FKI    | SAT     |
| Min hour                     | s you'd   | like to h | nave ev   | ery wee  | ek:        |                |   | TO                      |           |                    |                 |          |               |        |         |
| Please fil                   | out the   | e above   | table a   | nd let u | ıs know    | when           | it appli                                    | es: ^                   | O Sumi    | mer O              | Durin           | g School | ΟY            | ear Ro | und     |
| In the eve                   | ent that  | you cho   | ose eith  | er the s | summe      | r or scł       | nool ab                                     | ove, pleas              | e fill ou | t the tab          | le belo         | w to let | us kno        | w the  | rest of |
|                              | SUN MON TUE WED THU FRI SAT your availability if any: |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
| FROM                         |   |           |           |          |            |                | Summer O During School ONo Other Availabili |                         |           |                    | ilability       |          |               |        |         |
| то                           |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                | EDUC  | ATION                   |           |                    |                 |          |               |        |         |
| High Scho                    | ool (Last   | tattend   | ed):      |          |            |                | City/State                                  |                         |           |                    | Graduation Year |          |               |        |         |
| College & Vocational School: |   |           |           |          | City/State |                |   | Graduation Year & Major |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           | *FC      | DR PELI    | CAN'S U        | JSE ON                                      | LY, PLEAS               | E LEAVE   | BLANK <sup>*</sup> | k               |          |               |        |         |
| CONTACT                      | ATTEM   | 1PT NOT   | ES:       |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
| INTERVIE                     | W NOT   | ES:       |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |
|                              |   |           |           |          |            |                |   |                         |           |                    |                 |          |               |        |         |



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| -               |               | icates, leadership positions                 | -                                       | -                  | ou're proud of and want to show of |
|-----------------|---------------|--|---|--------------------|------------------------------------|
|                 |               |  |   |                    |                                    |
|                 |               |  | eran? O Ye                              |                    |                                    |
|                 |               | EMPLO  | OYMENT HISTO                            | DRY                |                                    |
|                 | (             | (Please Include odd jobs such                | as babysitting, le                      | awn care or volunt | teering)                           |
| Have you ever w | orked at a P  | elican's SnoBalls before?                    | O Yes O No                              | If yes, which lo   | ocation?                           |
| Name & Address  | of Employe    | er:  |   |                    |                                    |
| First day L     | .ast Day      | Phone #                                      | Supervisor:                             | Wage/Pay:          | Reason for leaving:                |
| Name & Address  | of Employe    |  |   |                    |                                    |
| First day L     | .ast Day      | Phone #                                      | Supervisor:                             | Wage/Pay:          | Reason for leaving:                |
| Name & Address  | of Employe    | r:   |   |                    |                                    |
| First day L     | .ast Day      | Phone #                                      | Supervisor:                             | Wage/Pay:          | Reason for leaving:                |
|                 |               |  |   |                    |                                    |
|                 |               | 1  | REFERENCES                              |                    |                                    |
| Ple             | ase provide 3 | 3. May include current or past<br>familiar w | t employers/ sup<br>vith your qualifice |                    | or any other individual            |

| Name | Address | Phone | Relationship | Years Known |
|------|---------|-------|--------------|-------------|
|      |         |       |              |             |
|      |         |       |              |             |
|      |         |       |              |             |
|      |         |       |              |             |

**TEAM MEMBER APPLICATION** 

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## NOTIFICATION, AUTHORIZATION AND CERTIFICATION:

I am hereby notified that certain diseases such as Hepatitis A, E Coli 0157, Salmonella, Shigella, Staphylococcus, Giardia, Streptococcus and Campylobacter will prevent me from handling food equipment until a clean bill of health is received from my medical doctor. It is my obligation to <u>PCB Enterprise, LLC</u> to immediately notify my supervisor should I knowingly become or believe that I am infected with any of these diseases.

I hereby authorize the former employers and references I have listed on this application to provide to <u>PCB</u> <u>Enterprise, LLC</u> with any information that would be meaningful and relevant to this employment application and I release all parties from all liabilities and/or damages that result from furnishing such information.

I hereby certify that I have fully read and have accurately completed this employment application to the best of my knowledge. I acknowledge that any false information contained in this employment application may be grounds for <u>PCB Enterprise, LLC</u> to disregard my employment application or to terminate my employment upon discovery of such false information.

I agree to read and follow the rules and regulations contained in the PCB Enterprise, LLC Employees

Handbook that will be provided to me upon my employment and which may be updated periodically by <u>PCB Enterprise</u>, <u>LLC</u>. I understand that <u>PCB Enterprise, LLC</u> is an at-will employer and that <u>PCB Enterprise, LLC</u> may terminate my employment at any time for any reason, with or without cause and that I also have these same rights with regard to terminating my own employment.

I understand that Pelican's SnoBalls is an equal opportunity employer and that <u>PCB Enterprise, LLC</u> makes every effort to comply with various federal, state and local employment laws, as applicable. I also understand that the information I have provided in this application will not be used for any purposes(s) that are prohibited by law.

PELICAN'S EMPLOYS YOU EXCLUSIVELY ON A SEASONAL BASIS FOR APPROXIMATELY SEVEN MONTHS FROM YOUR HIRE DATE THROUGH THE DATE THAT PELICANS WILL CLOSE IN OCTOBER OF THAT SAME YEAR. DURING YOUR SEASONAL EMPLOYMENT, PELICAN'S EMPLOYS YOU ON AN AT-WILL BASIS, MEANING THAT YOUR SEASONAL EMPLOYMENT MAY END AT ANY TIME AND FOR ANY OR NO REASON.