

TEAM MEMBER APPLICATION

for the franchise location on 2074 NC Hwy 172, Snead's Ferry, NC 28460

	THE BASICS								
NAME (print): Last	Middle I First			Date					
CURRENT ADDRESS:	City		State			_ Zip			
PHONE NUMBERS: Cell		Home _							
E-MAIL:									
DO YOU HAVE RELIABLE TRANSPORTATION?	O Yes O No	Wha	it wage o	do you	expect?				
If you are under 18 years old, how old are you?	Are yo	ou eligib	le to wo	rk in th	e USA?	C	Yes C	) No	
	YOUR AVAILABILIT	Υ							
Max hours you are able to work in a week:		SUN	MON	TUE	WED	THU	FRI	SAT	
Min hours you'd like to have every week:	FROM TO								
Please fill out the above table and let us know w		C Sumr	ner O	L During	s School	O Y	L ear Ro	und	
TO TO		mmer	O Duri	ng Scho	ool O	No Oth	er Ava	ilability	
	EDUCATION								
High School (Last attended):									
College & Vocational School:	City/State			Graduation Year & Major					
*FOR PELICA	AN'S USE ONLY, PLEAS	E LEAVE	BLANK*	•					
CONTACT ATTEMPT NOTES:									
INTERVIEW NOTES:									
INTERVIEW NOTES:									
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		ļ	ACHIEVEMENTS				
	•	icates, leadership positio	•	•	•	want to show off	
		Are you a ve	eteran? O Ye	es O No			
		ЕМР	LOYMENT HISTO	RY			
		(Please Include odd jobs suc	ch as babysitting, la	ıwn care or volun	teering)		
Have you e	ver worked at a P	elican's SnoBalls before?	O Yes O No	If yes, which lo	cation?		
Name & Ad	dress of Employe	r:					
First day	Last Day	Phone #	Supervisor:	Wage/Pay:	Reason for leav	ring:	
Name & Ad	dress of Employe	r:					
First day	Last Day	Phone #	Supervisor:	Wage/Pay:	Reason for leaving:		
Name & Ad	dress of Employe	r:					
First day	Last Day		Supervisor:	Wage/Pay:	Reason for leav	ring:	
			REFERENCES				
	Please provide 3	3. May include current or pa familiar	ast employers/ supe with your qualifica		or any other individ	lual	
		ress	Phone		Relationship Years Kr		



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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 LuMo Refreshments, LLC\_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 LuMo Refreshments, LLC 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 LuMo Refreshments, LLC 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 LuMo Refreshments, LLC Employees

Handbook that will be provided to me upon my employment and which may be updated periodically by LuMo Refreshments, LLC. I understand that LuMo Refreshments, LLC is an at-will employer and that LuMo Refreshments, LLC 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 LuMo Refreshments, LLC 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.

I understand that Pelican's SnoBalls employs you exclusively on a seasonal basis for approximately eight months from your hire date through the date the Pelican's SnoBalls will close in October of that same year. During your seasonal employment, Pelican's SnoBalls employs you on an at-will basis, meaning that your seasonal employment may end at any time and for any or no reason.

DATE	APPLICANT SIGNATURE	