



Barista Application

Applicant Information

Full Name: _____ DoB: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Were you referred by someone? If so, whom: _____

Previous Employment

Company: _____ Phone: _____

Job Title: _____ Hourly Wage: \$ _____

From: _____ To: _____ Reason for Leaving: _____

Please mark "X" in the box if you do not have any work history: ☐

Work Availability

Please mark "X" to indicate your availability.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning*							
Afternoon/Evening*							

* Morning shift varies anytime between 6:00 AM – 12:00 PM

** Night shift varies anytime between 12:00 PM – 3:00 PM

Roughly, how many hours **per week** are you available to work? _____

When are you available to start employment? _____

Disclaimer and Signature

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.

Signature: _____ Date: _____