

LOVE AT FIRST BITE



Catering

Employee information

PERSONAL

Full name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/unit #*

City *State* *Zip code*

Home phone: (____) _____ Cell phone: (____) _____

Personal email address: _____

Social security number: _____/_____/_____

Birth date: _____ Driver's License # & expiry: _____

Safe-serv certification expires: _____ Marital status: _____

Spouse's name: _____

Spouse's employer: _____ Spouse's work phone: (____) _____

ROLE

Role title: _____

Direct manager: _____

Work location: _____

Start date: _____/_____/_____ Salary (if applicable):_\$ _____

EMERGENCY CONTACT

Full name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/unit #*

City *State* *Zip code*

Primary phone: (____) _____ Alternate phone: (____) _____

Email address: _____

Relationship: _____