

Eden Corn Festival, Inc.

Employment Application

Name

 Last First Middle

Address

 Number and Street

 City State Zip

 Telephone (Home) Telephone (Cell)

 Telephone (work) E-Mail Address

Are you at least eighteen years of age? Yes No

If Not, are you under 16 16-17

Have you ever worked for the Corn Festival, Inc. Before? Yes No

If so, what year(s) _____ What position: _____

EDUCATION Name of School Highest Grade Completed

 High School

 College

 Other

Availability N = Not Available Y = Available

Date Mon- Tues- Wed- Thurs- Fri- Sat- Sun- Mon-

7am-noon								
----------	--	--	--	--	--	--	--	--

1pm-mid								
---------	--	--	--	--	--	--	--	--

References: 2 references (not relatives)

1) _____
 Name Address Occupation Phone

2) _____
 Name Address Occupation Phone

Please mail completed application to: Eden Corn Festival, Inc.
P.O. Box 86
Eden, NY 14057
Attention: Employment Chairman