NEED A GIG?												
		Last Name			First Name N			ddle Initia	I	Today's D	oday's Date	
		Street Address							Apartment/Box/Etc.			
TACO		City		State/Province				Zip Code		Country		
TACO BELL												
		Primary Telephone Numb			er	Email Ad	dres	s				
PERSONAL INFORMATION												
Are you 16 years or older?			IF NO	Can you provide a work permit?				Do you have reliable transportation?				
YES	10	or		\rightarrow	YES	or		NO	YES	or	NO	
Work preference (Full Time, Part Time)					Shift Preference (Days, Nights)				Willing to work a changing schedule?			
									YES	or	NO	
Select which days of the week you are available to work (circle all that apply).												
MON	TU	UE WED		THU	FRI	SAT		SUN	HOLIDAYS			

NEED A GIG?											
		Last	Name	First Name		Middle I	Middle Initial		Today's Date		
TACO BELL.											
		Street Address							Apartment/Box/Etc.		
TACO		City		State/Province				Zip Code		Country	
BFI	ĭ										
		Primary Telephone Numb			er	Email Ad	dress				
				PEF	RSONAL IN	FORMATIC	N				
Are you 16 years or older?					Can you provide a work permit?				Do you have reliable transportation?		
YES	OI	r	NO	\rightarrow	YES	or	NO		YES	or	NO
Work preference (Full Time, Part Time)				Shift Preference (Days, Nights)				Willing to work a changing schedule?			
									YES	or	NO
Select which days of the week you are available to work (circle all that apply).											
MON	TU	E WED THU		THU	FRI	SAT S		N	HOLIDAYS		