

Cathedral Kitchen

Culinary Arts Training (CAT) Program Application



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	Contact for a message		
Date of Birth	Social Security No.	E-mail:	
Are you legally authorized to work in the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			

EDUCATION			
High School	Address		
	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	GED: YES <input type="checkbox"/> NO <input type="checkbox"/>	
College	Address		
	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	# Years Attended	Degree: AA <input type="checkbox"/> BA/BS: <input type="checkbox"/>
Other	Address		
	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

Do you have transportation to and from the program? YES NO

REFERRAL SOURCE: How did you hear about this program? _____

EMERGENCY CONTACT INFORMATION

Name	
Address	Phone

WORK HISTORY

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to enrollment, I understand that false or misleading information in my application or interview may result in my expulsion from the program.

Signature _____ Date _____