



The Measuring Cup \* 320 Division St. S. \* Northfield, MN 55057  
507-664-9152 [info@measuringcupofnorthfield.com](mailto:info@measuringcupofnorthfield.com)

## APPLICATION FOR EMPLOYMENT

Thank you for your interest in joining The Measuring Cup Team. If your application seems to fit the qualities we are looking for we will call you for an interview.

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### PERSONAL INFORMATION

FULL NAME (first middle last) \_\_\_\_\_ S.S.# \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ Are you 18 years or older? \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of visa or Immigration Status? Yes No

Have you ever been fired, laid off or asked to resign by an employer? Yes No \_\_\_\_\_

If yes, please explain

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### AVAILABILITY

Date you can start \_\_\_\_\_ # Hours (per week) desired \_\_\_\_\_

Hrs Available: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_

F \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

How long of a commitment are you looking for?

1-6 months 6-12 months 1 year 18months 2 years 5 or more years

What position(s) are you interested in?

Sales Associate

Merchandiser

Assistant Manager

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### CURRENT & FORMER EMPLOYER(S)

Employer \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Your Title \_\_\_\_\_ Your Salary (final) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Supervisor Name & Email \_\_\_\_\_  
Description of duties \_\_\_\_\_

Employer \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Your Title \_\_\_\_\_ Your Salary (final) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Supervisor Name & Email \_\_\_\_\_  
Description of duties \_\_\_\_\_

Employer \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Your Title \_\_\_\_\_ Your Salary (final) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Supervisor Name & Email \_\_\_\_\_  
Description of duties \_\_\_\_\_

Which of these jobs did you like best?

Why?

Are you currently employed?

Where?

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**EDUCATION**

Name and Location of School

# Yrs Attended

Graduated?

Major/Degree

High

School

College/Tech

School

Military Service

(Or additional schooling)

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**REFERENCES** (Names of 3 persons, not related to you, whom you have known at least one year)

Name

Email

Yrs Acquainted

How Acquainted

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1

2

3

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**MORE ABOUT YOU – We want to know more about your unique perspective. Keep in mind, there are no “right” or “wrong” answers to the questions in this section.**

Why do you want to work for The Measuring Cup?

What do you have to offer our company?

Do you prefer to work alone or with others?

Explain

What are your strengths?

What inspires you?

How do you initiate conversation with someone you don't know well?

What methods do you use in overcoming obstacles?

Are you more of an extraverted or introverted person?

Explain

What qualities make a good sales person?

What expectations do you have of the place you work for and of the people who run it?

How will you help us to grow and create success for our company?

**Please complete the following phrases:**

People are...

**Please complete the following phrases (continued):**

Life is...

I am...

Money is...

My purpose in life is...

In 1 year, I see myself...

In 5 years, I see myself...

I am dedicated to...

Please use the space below to tell us about any other talents, skills or interests you have:

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS

IN CASE OF  
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

