

Trainee Application and Referral Form

Date:			
Name of Referrer:	Referring Agency:		
Contact Information			
First Name:	Last Name:	Pronouns:	
Address:			
Home Phone:	Cell Phone:		
Email Address:			
Food Service Experience			
Have you worked in the food service industry before? $\hfill\square$ Yes $\hfill\square$ No If yes, what did you do?			
Can you stand for 8 hours per day? ☐ Yes ☐ No			
Are you able to lift 40 pounds? ☐ Yes ☐ No			
Why are you interested in the job-training program at Fresh Starts Culinary Academy?			
What are your plans after receiving a Certificate in Culinary Arts?			
CalFresh Program			
Are you currently enrolled in the CalFresh (food stamps) program? (This will not affect your admittance decision.) ☐ Yes ☐ No			

Work Experience

Please tell us about any work experience you may have. Please include: 1) Where you worked, 2) Your job title and 3) How long you worked there.



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How much per hour did you earn in your last job?				
Are you currently working? ☐ Yes ☐ No If yes, how many hours a week?				
Other Information				
Highest level of education completed:				
 ☐ High school, no diploma ☐ High school graduate, diploma or equivalent (GED) ☐ College 				
Number of years at college/university: Where did you attend?				
Did you receive a degree? ☐ Yes ☐ No If yes, what degree?				
Have you completed any vocational training? ☐ Yes ☐ No				
How will you get to class every day?				
Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Convictions for marijuana-related offenses that are more than two years old need not be listed.) ☐ Yes ☐ No				
If yes, state the nature of the crime(s), when and where convicted, and disposition of the case:				
Emergency Contact				
Name				
Street Address				
City, St., Zip Code				
Home Phone				
Work Phone				
Email Address				



Program Requirements

Academy. Please initial each one if	you agree to them.
I understand that daily attendan	
-	to remain drug and alcohol free while attending
class, meetings, and on the job.	
	ime and prepared to stay the entire day.
	ng to accept instruction from my trainers and
•	that is assigned to me with a positive attitude.
	ime, come prepared in a clean complete uniform
including hat and shoes, and be pre	·
I understand that I must have a	willingness to confront my personal challenges and/
or barriers.	
·	e a lock for my locker to use while I am enrolled in
the Fresh Starts training program.	
	and Homeward Bound are not responsible for
damage, loss, or theft of my persona	
	s an employment training program. By participating,
I'm committed to gaining employable	e skills and to actively participating in job search.
Agreement and Signature)
By submitting this application. I affire	m that the facts set forth in it are true and complete.
I understand that if I am accepted as other misrepresentations made by n dismissal. I further recognize that if	s a trainee, any false statements, omissions, or ne on this application may result in my immediate I am selected for this training program, I will be certified course with a value of \$5,000 at completion.
Name (please print):	Date (month/day/year):
Signature:	

Listed below are some of the requirements for trainees at Fresh Starts Culinary

Equal Opportunity

We consider all applicants without regard to race, color, religion, gender, ancestry, marital status, veteran status, national origin, sexual orientation, age or disability and any other legally protected status.