SAUVIE ISLAND SCHOOL

Application for Employment – Food Service Manager & Chef

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Cell Phone	E-mail Address		
Work Phone	Permission to contact current employer? YES ☐ NO ☐		
Date Available	Desired Salary		
Position Applied for: Food Service Manager & Chef			
Are you authorized to work in the U.S.? YES ☐ NO ☐			
If selected for employment, are you willing to submit to a pre-employment drug screening test and/or TB test? YES ☐ NO ☐			
If selected for employment, are you willing to submit to a background check and fingerprinting? YES ☐ NO ☐			

EXPERIENCE

Total Years Experience:	Administrative:	Licensed:	Non-licensed:
Title of Current Position:		**Years in Current Position :**	

Work Experience

Institution / School District	Address / Phone Number	Title	Start Date	End Date

RECORD OF PROFESSIONAL EDUCATION

Institution	Dates	Major	Degree

1. QUESTION: Tell us why you are interested in working at Sauvie Island School.

2. QUESTION: This position requires managing multiple tasks simultaneously to ensure lunch service runs smoothly. Please describe the strategies, tools, or methods you've used in previous roles to stay organized and efficiently handle competing priorities.

3. QUESTION: This position involves interacting with and supervising student helpers in the cafeteria and kitchen. Please describe your comfort level working with students, as well as any experience or desire you have in mentoring, guiding, or leading young individuals in a work setting.

4. QUESTION: This position involves menu planning, ordering, and maintaining documentation for the NSL program. It requires proficiency in using technology, including spreadsheets, email, and participating in virtual trainings and meetings. Please describe your experience and proficiency with these tools, as well as any other relevant technology skills you possess.

REFERENCES

Please list three professional references. Include Superintendents, Principals, Supervisors, Team Leaders, etc., for whom you have worked.	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

MILITARY SERVICE (IF ANY)

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

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

You may email or mail your application.
Email: dmeeuwsen@sauvieislandschool.org
Mail: Sauvie Island School, 14445 NW Charlton Road, Portland, OR 97231
Fax: 503-621-3384