



SOZO APPLICATION FORM

Welcome to Sozo! We're always looking to grow our team with people who have a heart for ministry and a love of coffee!

Position Applied For:

Personal Information

First Name: _____ Last Name: _____

Address: _____

Email: _____ Phone: _____

Are you over 18? Yes No

Are you a US Citizen? Yes No

How many hours a week would you like to work?

0-15 15-20 20-25 25-30 30-35 35+

During which hours are you available to work?

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

From (Time)							
To (Time)							

Shop Hours 7am-Midnight 7am-Midnight 7am-Midnight 7am-Midnight 7am-Midnight 8am-Midnight 1pm-Midnight

How long would you like to be with Sozo and Great Adventure Ministries?

3 months 6 months 1-3 years Seasonal Indefinite

