Michigan Chefs de Cuisine / Oakland Community College
Cooks Apprenticeship Application

Name: _____ Social Security #: _____-____-_____
(*Last*) (*First*) (*Initial*)

Address: _____ Phone: (_____) _____-_____

City: _____ ST: ____ Zip: _____

Email Address: _____ Cell: (_____) _____-_____

CURRENT EMPLOYMENT INFORMATION

Name of Establishment: _____

Address: _____ Phone: (_____) _____-_____

City: _____ ST: ____ Zip: _____

Supervisor's Name: _____ Title: _____

Position You Are Currently Holding: _____

Regular Hours You Work: _____

WORK HISTORY

DATES	ESTABLISHMENT	POSITION

Please list all Colleges & High School/Food Service/Vocational Schools previously attended.
(Include those in which no credits were earned)

Name of Institution	City & State	Attendance Dates

CAREER OBJECTIVE: _____

_____

Return to: CULINARY STUDIES INSTITUTE
OAKLAND COMMUNITY COLLEGE
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Farmington Hills, MI 48334