



# APPLICATION for EMPLOYMENT

We consider any and all applicants without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

What position are you seeking?  SERVER  BARTENDER  COOK  HOST  BUSSER  DISHWASHER  ANY

How did you find out about this job? \_\_\_\_\_

Why are you seeking a new job at this time? \_\_\_\_\_

## Applicant Information

First Name \_\_\_\_\_ MI \_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Cell Phone ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Soc. Security No. \_\_\_\_\_

Are you at least 18 years of age? \_\_\_\_\_ If under 18 yrs, can you furnish a valid work permit? \_\_\_\_\_

Are you legally eligible for employment in the U.S.? \_\_\_\_\_ (proof of U.S. citizenship or immigration status is required if hired.)

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, state the nature of the offense and disposition of the case below.

(NOTE: the existence of a criminal record does not constitute immediate employment disqualification. Each case will be reviewed on its own merit.)

Are you a veteran? \_\_\_\_\_ If yes, provide details of service: Branch \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

## Employment Information

What type of employment are you seeking?  Full Time  Part Time  Temporary

Indicate the days and times that you would be available to work. Please use an "X" to signify any unavailable days and times.

WEEK DAY:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
AM	to	to	to	to	to	to	to
PM	to	to	to	to	to	to	to

Are you willing to work overtime, if needed \_\_\_\_\_ Weekends? \_\_\_\_\_ Holidays? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If hired, when would you be able to start? \_\_\_\_\_

Have you ever worked at this establishment before? \_\_\_\_\_ If yes, what position: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Have you ever been discharged or asked to resign from any position? \_\_\_\_\_ If yes, from where? \_\_\_\_\_

Please describe: \_\_\_\_\_

## Education and Job Qualifications

Please list any education, qualifications, specialized training or skills that you possess that relate to the position to which you are applying (schools, diplomas, degrees, vocational education, licenses, military training, etc).

Establishment	From	To	Qualifications / Skills / Training, etc.

**Work History (please begin with most recent)**

Company: \_\_\_\_\_ Phone No. ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Location: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_

Salary: Beginning \$ \_\_\_\_\_ Ending \$ \_\_\_\_\_ Supervisors Name & Title: \_\_\_\_\_

Duties and Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company: \_\_\_\_\_ Phone No. ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Location: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_

Salary: Beginning \$ \_\_\_\_\_ Ending \$ \_\_\_\_\_ Supervisors Name & Title: \_\_\_\_\_

Duties and Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company: \_\_\_\_\_ Phone No. ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Location: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_

Salary: Beginning \$ \_\_\_\_\_ Ending \$ \_\_\_\_\_ Supervisors Name & Title: \_\_\_\_\_

Duties and Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**Authorizations and At-Will Employment Agreement (please read carefully, then sign and date below)**

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company. Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

**AT-WILL EMPLOYMENT AGREEMENT**

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Dated \_\_\_\_ / \_\_\_\_ / \_\_\_\_