EMPLOYMENT APPLICATION



This Company is an equal opportunity employer. In all our employment practices, including hiring, we are firmly committed to equal opportunity without regard to race, religion, color, sex, age, national origin, citizenship, disability or any other basis of discrimination prohibited by applicable local, state or federal law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on such grounds.

|--|

ANSWER ALL QUESTIONS. INCOMPLETE APPLICATIONS WILL BE REJECTED

Name:					Street Addres	s:			
]	Last	First	MI					
Apt # Or Box		City		State	Zip		SS No		
Cell	(_)		18 or older? () Yes () N	o E	Birth Date: _		
Home	(_)		E-mail					
•		-	ou are applying:		() Rarta	nder () Waitstaff	() Hostess	
•	What was the second of the sec	wage/salary do y d, when could	you expect? \$ you start work?		per				
•	Have y If Yes, Who re	you ever been e , when and when eferred you to th	employed by this ore?nis company for en	company before? nployment?					
•	Names	s of friends or re	latives working fo	r the Company (li	st name(s) and	relation	ship):		
AVAIL How ma			you available for v	work?	(<u>LIST TIME</u>	S BELO	<u>W)</u>		
		Monday	Tuesday	Wednesday	Thurs	sday	Friday	Saturday	Sunday
FROM									
TO									
•	If Yes	, when:	shifts or days you		not work? ()	Yes () No		
•	Do yo Have	u have transpo you ever been (rom this location? rtation to work? discharged (or ten	() Yes () Norminated) by a fo	rmer employ		Yes () No) 	
High So				City			_ State	Zip	Last
		te? () Yes () No <u>Still E</u>						
Trade o	or Colleg	ge		City			State	Zip	
			Course/I) No Still E			Degree	e(S)		
•	J	` , , ` `			. ,				

EMPLOYMENT HISTORY: (start with most recent employer)
Company
Company Address City State Telephone Job Title Salary / Wage per Dates Worked: From To
Salary / Wage ner Dates Worked: From To
Still Employed? () Yes () No May we contact this employer? () Yes () No Supervisor
Reason for leaving
Reference Check Performed By
•
Company Address City State Telephone Job Title Salary / Wage per Dates Worked: From To
City State Telephone Job Title
Salary / Wage per Dates Worked: From To
Still Employed? () Yes () No May we contact this employer? () Yes () No Supervisor
Reason for leaving
Reason for leaving
Company Address City State Telephone Job Title
City State Telephone Job Title
Salary / Wage per Dates Worked: From To
Still Employed? () Yes () No May we contact this employer? () Yes () No Supervisor
Reason for leaving
Reference Check Performed By
* HAVE YOU EVER BEEN CONVICTED OF, PLED GUILTY TO OR PLED NO CONTEST TO A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS? () YES () NO IF YES, DESCRIBE:
* A conviction will not necessarily bar you from employment.
AGREEMENT
PLEASE READ THE FOLLOWING CAREFULLY AND SIGN IN THE SPACE PROVIDED:
I hereby certify that I have read and fully completed this application and that the facts set forth in this employment application are to and correct to the best of my knowledge, and I agree and understand that any misrepresentation or falsification of information omission of information during the employment application process may disqualify me from further consideration for employment affective if employed, will subject me to dismissal. I further certify that I am a true and bona fide job applicant, honestly interested in work in the position(s) for which I have applied, and am seeking employment with this company solely to provide me with the benefits of job and for no other purpose.
I acknowledge that the Company reserves the right to modify or amend its policies at any time, without prior notice. These policies not create any promises or contractual obligations between this Company and its employees. At this Company, my employment is will. This means I am free to terminate my employment at any time, for any reason, with or without cause, and this Company retains the same rights. I further understand and agree that the Owner/President of this Company is the only person who may make exception to this, including the at-will status of my employment, and it must be in writing and duly executed by the Owner/President this Company.
AUTHORIZATION TO RELEASE INFORMATION : I authorize the references and/or employers listed on this application to go you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, release all parties from all liability for any damage that may result from furnishing such information to you. I agree and understate that the Company and its agents may investigate or seek information concerning my background and/or previous employment, whet of record or not. I further agree and understand that if employed, the Company may at any time seek any information from whate source, which in its discretion, it deems relevant to my employment.
NO DRUG USE POLICY: This Company does not hire persons who use illegal drugs. All persons seeking employment or employ with this Company may be required to take and pass a screen for illegal drugs, and may be subject to periodic tests for illegal drugs hereby voluntarily consent to provide a urine specimen (or blood specimen as required for alcohol testing only) at a collection faci designated by the Company, and further consent to have the specimen tested at a laboratory selected by the Company. I here certify that I (please initial) do not use illegal drugs.
Signature Date