



# Employment Application

You may drop off your completed application at the restaurant. Please give it to the hostess.

Please print in ink or type

Today's Date: \_\_\_\_\_

Position applying for: \_\_\_\_\_

Last name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle initial: \_\_\_\_\_

Home Address:

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License # \_\_\_\_\_ E-mail address: \_\_\_\_\_ Social Security # \_\_\_\_\_

Phone#

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Are you eligible for employment in the U.S? Yes No If yes, you may be required to supply verification.

Days Available Mondays from \_\_\_\_\_ to \_\_\_\_\_ Tuesdays from \_\_\_\_\_ to \_\_\_\_\_ Wednesdays from \_\_\_\_\_ to \_\_\_\_\_  
Thursdays from \_\_\_\_\_ to \_\_\_\_\_ Fridays from \_\_\_\_\_ to \_\_\_\_\_ Saturdays from \_\_\_\_\_ to \_\_\_\_\_

If hired, when can you start: \_\_\_\_\_

In case of accident, notify:

Name \_\_\_\_\_

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Relationship to you \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name \_\_\_\_\_

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Relationship to you \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

If you are under 18 years of age, please indicate your date of birth \_\_\_\_\_

Have you ever been convicted of a crime other than a traffic violation: Yes No If yes, please explain\*. \*Note: A conviction will not necessarily bar you from employment. Each conviction is judged on its own merits with respect to time, circumstances and seriousness.

## Education

High School Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Graduated Yes No Diploma or Course of Study \_\_\_\_\_

High School Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Graduated Yes No Diploma or Course of Study \_\_\_\_\_

College or University \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Graduated Yes No Diploma or Course of Study \_\_\_\_\_

Other: Trade or Nursing School, Military \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Graduated Yes No Diploma or Course of Study \_\_\_\_\_

List trade or professional organizations of which you are a member, including office held, if applicable, and professional licenses and certification you consider significant. List specialized training, apprenticeships, or other skills: \_\_\_\_\_

## Employment History

Present or Last Employer \_\_\_\_\_ Job Title \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Start Pay \_\_\_\_\_ End Pay \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Supervisor's Title \_\_\_\_\_ Ok to contact? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_ Job Title \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Start Pay \_\_\_\_\_ End Pay \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Supervisor's Title \_\_\_\_\_ Ok to contact? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_ Job Title \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Start Pay \_\_\_\_\_ End Pay \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Supervisor's Title \_\_\_\_\_ Ok to contact? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_ Job Title \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Start Pay \_\_\_\_\_ End Pay \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Supervisor's Title \_\_\_\_\_ Ok to contact? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

## U.S. Military Service

Branch of Military \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Present or last Rank \_\_\_\_\_ Current Status \_\_\_\_\_

Job Title \_\_\_\_\_ Duties Performed \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Job Title \_\_\_\_\_ Duties Performed \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

## References

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Years known \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Years known \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Years known \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Years known \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

**Information to the applicant:** As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may be required to: supply your birth certificate or other proof of authorization to work in the US, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms.

I understand and agree to the information above

Applicant's Signature \_\_\_\_\_