



POSITION APPLIED FOR: \_\_\_\_\_

DATE: \_\_\_\_\_

# APPLICATION FOR EMPLOYMENT

(please answer all questions)

FOR OFFICE USE ONLY

DATE STARTED: \_\_\_\_\_

EMPLOYEE NO: \_\_\_\_\_

DEPT.: \_\_\_\_\_

Kitchen Bar Dining Rm. Other

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

NOTICE: Applicant should read the following information carefully before filling out any questions in this form. We are an equal opportunity employer and fully subscribe to the principles of equal employment opportunity. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes and information requested on this application will not be used for any purpose prohibited by law.

NAME LAST FIRST MIDDLE SOCIAL SECURITY NUMBER

PRESENT ADDRESS CITY STATE ZIP CODE

( )

PHONE

How long have you lived at the above address? \_\_\_\_\_

PREVIOUS ADDRESS CITY STATE ZIP How Long? \_\_\_\_\_

Are you 21 years or older? \_\_\_\_\_ Yes \_\_\_\_\_ No. If not state date of birth \_\_\_\_\_

Do you have a valid certificate of age? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are under 18 years of age, have you received your parent/ guardian's permission to work? \_\_\_\_\_ Yes \_\_\_\_\_ No

High School \_\_\_\_\_ School Contact (Counselor, Teacher) \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_ On what job? \_\_\_\_\_

Do you have access to a car (for some positions a vehicle is required)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a U.S. citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are You Applying For:  Full Time  Part Time  Temporary  Days Only  Nights Only  Days/Nights

Who recommended you for this position? \_\_\_\_\_

If related to anyone in this establishment, give name \_\_\_\_\_

## EDUCATION

SCHOOLING	NAME AND ADDRESS OF SCHOOL				EDUCATION COMPLETED		GRADUATE	
					Grade	Year	yes	No
HIGH SCHOOL								
COLLEGE OR UNIVERSITY								
OTHERS (Specify)								
MILITARY SERVICE SCHOOLS ATTENDED								
MILITARY SERVICE SCHOOLS ATTENDED								
MILITARY SERVICE RECORD	WAR VETERAN <input type="checkbox"/> YES <input type="checkbox"/> NO	BRANCH	FROM (DATE)	TO (DATE)	HIGHEST GRADE	HONORABLE DISCHARGE <input type="checkbox"/> YES <input type="checkbox"/> NO	ANY UNFULFILLED MILITARY OBLIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO	

(Continued on Reverse Side)

## CHECK KIND OF WORK YOU HAVE DONE

- |                                     |                                      |                                         |                                         |                                      |                                       |                                                  |
|-------------------------------------|--------------------------------------|-----------------------------------------|-----------------------------------------|--------------------------------------|---------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Bartender  | <input type="checkbox"/> Chef        | <input type="checkbox"/> Cashier        | <input type="checkbox"/> Fountain       | <input type="checkbox"/> Pantry      | <input type="checkbox"/> Salad        | <input type="checkbox"/> Vegetable Cook          |
| <input type="checkbox"/> Bookkeeper | <input type="checkbox"/> Cook        | <input type="checkbox"/> Dietitian      | <input type="checkbox"/> Host/Hostess   | <input type="checkbox"/> Pastry Cook | <input type="checkbox"/> Sandwiches   | <input type="checkbox"/> Wait Staff              |
| <input type="checkbox"/> Bus Person | <input type="checkbox"/> Cook Helper | <input type="checkbox"/> Dishwasher     | <input type="checkbox"/> Kitchen Helper | <input type="checkbox"/> Porter      | <input type="checkbox"/> Stenographer | <input type="checkbox"/> Wait Staff-Arm Service  |
| <input type="checkbox"/> Carver     | <input type="checkbox"/> Counter     | <input type="checkbox"/> Food Prep Tech | <input type="checkbox"/> Manager        | <input type="checkbox"/> Pot Washer  | <input type="checkbox"/> Typist       | <input type="checkbox"/> Wait Staff-Tray Service |

## CHECK KIND OF WORK YOU HAVE DONE

(LIST BELOW YOUR LAST FOUR EMPLOYERS, STARTING WITH MOST RECENT ONE FIRST)

1. Company Name	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
Address					Date Started	Salary	
Phone					Date Left	Salary	
Job Duties							
2. Company Name	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
Address					Date Started	Salary	
Phone					Date Left	Salary	
Job Duties							
3. Company Name	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
Address					Date Started	Salary	
Phone					Date Left	Salary	
Job Duties							
4. Company Name	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
Address					Date Started	Salary	
Phone					Date Left	Salary	
Job Duties							

Have you ever applied to this company before? \_\_\_\_\_ Yes \_\_\_\_\_ No Where? \_\_\_\_\_ Why? \_\_\_\_\_

Are you employed? \_\_\_\_\_ Yes \_\_\_\_\_ No Telephone Number \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY -- (NAME, ADDRESS, PHONE) RELATIONSHIP, IF ANY.

1. I authorize investigation of all statements contained in this application.
2. I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is dependent on truthful answers.
3. I have read these statements and answered to these inquiries. \_\_\_\_\_ Yes \_\_\_\_\_ No

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

Signature: \_\_\_\_\_