



# APPLICATION FOR EMPLOYMENT

## Restaurant/Bar/Banquet Staff



NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ ALT PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLYING FOR: (check all that apply)

RESTAURANT WAITSTAFF       BARTENDER       COOK/FOOD PREP  
 BANQUET/EVENT WAITSTAFF       CHECK-IN DESK       OTHER \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_ DESIRED HOURLY WAGE: \_\_\_\_\_

Please check (✓) the shifts you are available to work (hours may vary):

AVAILABILITY	MON	TUES	WED	THURS	FRI	SAT	SUN
OPEN a.m.	--n/a--	--n/a--	--n/a--	--n/a--	--n/a--		
LUNCH a.m./p.m.	--n/a--						
DINNER p.m.	--n/a--						
CLOSE p.m.	--n/a--						

**PREVIOUS EMPLOYMENT - Please list three most recent jobs (start with the most recent or current job):**

1. Company: \_\_\_\_\_ Address: \_\_\_\_\_

Position(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone #: \_\_\_\_\_

Last Rate of Pay: _____	Reason for Leaving: (check one)	<input type="checkbox"/> Resigned with Notice	<input type="checkbox"/> Resigned without Notice	<input type="checkbox"/> Terminated
Eligible for Re-Hire? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Company: \_\_\_\_\_ Address: \_\_\_\_\_

Position(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone #: \_\_\_\_\_

Last Rate of Pay: _____	Reason for Leaving: (check one)	<input type="checkbox"/> Resigned with Notice	<input type="checkbox"/> Resigned without Notice	<input type="checkbox"/> Terminated
Eligible for Re-Hire? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			

3. Company: \_\_\_\_\_ Address: \_\_\_\_\_  
 Position(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Dates: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone #: \_\_\_\_\_

Last Rate of Pay: _____	Reason for Leaving: (check one)	<input type="checkbox"/> Resigned with Notice	<input type="checkbox"/> Resigned without Notice	<input type="checkbox"/> Terminated
Eligible for Re-Hire?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	May we contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you a citizen of the U.S.?  Yes  No *If no, are you authorized to work in the U.S.?*  
 Have you ever worked for this company?  Yes  No *If so, when?*  
 Have you ever been convicted of a felony?  Yes  No *If yes, explain.*  
(A conviction record does not necessarily disqualify you from employment: factors such as the date of the offense, seriousness & nature of the violation & rehabilitation will be taken into account.)

**EDUCATION**

High School: \_\_\_\_\_ Address: \_\_\_\_\_  
 From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Did you graduate?  Yes  No  
 College: \_\_\_\_\_ Address: \_\_\_\_\_  
 From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Did you graduate?  Yes  No  
 Other: \_\_\_\_\_ Address: \_\_\_\_\_  
 From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Did you graduate?  Yes  No

**SIGNATURE - By signing below you agree to the following statements:**

"I certify that the facts contained in this document are true and complete to the best of my knowledge, and understand that, if employed, falsified statements on this application shall be grounds for dismissal.  
 I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information that they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing the same to you.  
 I understand and agree that, if hired, my employment is for no definite period, and may regardless of the date of payment of my wages, tips and salary, be terminated at any time without prior notice."

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