



# Application for Employment

(Please type or print clearly)

Date		Position	
Applicant Name		Email Address	
Address		Telephone	
City		State & Zip	

If hired, can you furnish proof of eligibility to work in the U.S.?  Yes  No

Have you ever been convicted of a felony?  Yes  No

If yes, please describe the circumstances:


Are you applying for?  Full-Time  Part-Time  Either Full-Time or Part-Time

If required by the job you are applying for, do you have a driver's license? Proof may be required.

Yes  No

If applying for front-of-house / server position, are you currently TIPS or other alcohol server trained?

Yes  No

<b>Education:</b> Indicate highest school grade completed:					
<b>List all schools attended (If GED, give number, location and date).</b>					
Name of High School			City and State		
Name of College or University			Degree/Certificate/Diploma Earned		
Specialized Skills (Skills, Equipment Operated, Computer Software). <i>Please check the following skills you have or write in skills not listed.</i>					
Cash Handling <input type="checkbox"/>	Customer Service <input type="checkbox"/>	Food Preparation <input type="checkbox"/>	Food Safety <input type="checkbox"/>	Point of Sale Systems <input type="checkbox"/>	Heavy Equipment <input type="checkbox"/>
Computer: Basic <input type="checkbox"/>	Computer: Average <input type="checkbox"/>	Computer: Advanced <input type="checkbox"/>	Spread-sheets <input type="checkbox"/>	Word Processing <input type="checkbox"/>	Other <input type="checkbox"/>
State any additional information you feel may help us understand how you are qualified for the job.					

**Work Experience.** Start with your present or last job. Include any job-related military service assignments and volunteer activities. Gaps in employment may need to be documented.

Are you currently employed? Yes  No

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting Job Title	Hourly Rate/Salary		
Ending Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May we contact?		
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting Job Title	Hourly Rate/Salary		
Ending Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May we contact?		
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting Job Title	Hourly Rate/Salary		
Ending Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May we contact?		

<b>Professional/Personal References:</b> List three people who know you well enough to provide current and past information about you. Do not include relatives or former employers.		
Name and Occupation	Telephone Number	Years Known
1.		
2.		
3.		

Note to applicants: Only answer this question if you have reviewed the job description of the position you are applying for. Are you able to perform the required duties and activities of this position with or without a reasonable accommodation, as they have been described?  Yes  No

To the best of my knowledge, I hereby affirm with my signature that everything in this application is true, complete and correct.

Signature (type name): \_\_\_\_\_ Date: \_\_\_\_\_