

Employment Application

Qualified applicants are considered for all positions without regard to race, religion, sex, national origin, age, marital or veteran status, or disability



Date of Application _____

Name _____
Last First Middle Initial

Present Address _____
Street City State Zip Code

Email address _____ Telephone No. _____

Job Applying for? _____ Rate of pay expected? _____

How did you hear of this opening? _____

Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							Closed
To							Closed

How may hours per week would you like to work? _____

HOW WOULD YOU RATE YOURSELF

(1=Improvement needed 2=OK 3=Good 4=Top Performer)

_____ Energy Level	_____ Personal Pride
_____ Communication Skills	_____ Reliability
_____ Hospitality	_____ Team Work
_____ Time Management	_____ Stress Control

How would you describe your ideal work environment? _____

Tell us about a bad restaurant experience? _____

Tell us why you want to work with the public and serve our guest? Why you think this job is for you? _____

What are your personal strengths? _____

What would you consider your weakest area? _____

Where do you see yourself in one year, what do you want to be doing? _____

(Please note: All items on reverse side must be completed)

In the event you are required to use your personal or company automobile to conduct business, please complete the following: Do you have a valid driver's license? _____

Beginning with your most recent, list all present and past employment

Company	Start Date	End Date	Title	Duties	Ending Salary	Reason for leaving

Personal References (Please no relatives)

Name	Occupation	Phone Number

Record of Education

School	Name	Course of Study	Last Yr. Completed	Did you Graduate?	Diploma or Degree	Grade Average
High						
College						

Background Information

- Are you 18 years of age or older? **YES OR NO** If no, Date of Birth _____
- Have you ever been convicted of any felony? **YES OR NO**
- Have your ever been convicted of any crime ,excluding misdemeanors? **YES OR NO**
- Have you ever been convicted of any crime involving violence to another person? **YES OR NO**
- Have you ever been convicted of any crime involving dishonesty? **YES OR NO**
- Are you serving probation for any misdemeanor offense? **YES OR NO**
- Have you ever been counseled or disciplined for cash handling violations? **YES OR NO**

Important-Read Before Signing

I certify that information given herein is true and complete to the best of my knowledge.

I understand that incorrect, misleading or incomplete information on this application may result in immediate termination of employment. I understand that this employment application and any other company documents are not contracts of employment and that any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the employer at any time and for any reason. I understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs before and during employment.

Signature _____
Date