



**AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT**

In order for you to be considered for employment, this application must be filled out in its ENTIRETY.

General Information

Date: _____ Email: _____

Name: _____

Birth Date (if under 18) __/__/_____

Last First Middle

Present Address: _____ Street _____ City _____ State _____ Zip _____

Home phone: (____) _____ - _____ Person to contact in an emergency: _____

Cell phone: (____) _____ - _____ Full name & Telephone Number

Are you legally able to work in the United States? Yes No
(Proof of identity and legal authority to work in the U.S. is a condition of employment.)

(SPECIFIC POSITION MUST BE LISTED FOR THIS APPLICATION TO BE CONSIDERED.) For what position are you applying?

€ Cashier € Kitchen Staff € _____ € _____	Salary Desired: \$ _____ Type of Employment Desired: Full-Time Part-Time Date Available for Employment: __/__/_____ Referred By _____
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Have you ever been convicted of a felony which has not been annulled or sealed by a court? Yes No
If yes, please explain:

WORK SCHEDULE AVAILABILITY

What shifts/hours are you available to work? We have shifts from **11:00 AM to 12:00 AM**. (Please list hours in each AM/PM box).

SHIFT	MON	TUES	WED	THUR	FRI	SAT	SUN
AM	To	To	To	To	To	To	To
PM	To	To	To	To	To	To	To

Are you willing to work a split shift?

€ Yes
€ No

Are you willing to stay late in an emergency?

€ Yes
€ No

Are you willing to work holidays / weekends?

€ Yes
€ No

How many hours per week do you expect to work?

EDUCATION

Type of School	Name of School	Location of School	Courses Majored In		
High School				Diploma € Yes € No	GPA
College/ Other				Degree € Yes € No	GPA

BUSINESS EXPERIENCE

(List most recent three employers)

Present Employer (or most recent)	Phone:	From Mo. Year	To Mo. Year	Name of Supervisor	Title
Street Address				Your Position/Duties	
City	State	Zip	Salary		Reason For Leaving
Present Employer (or most recent)	Phone:	From Mo. Year	To Mo. Year	Name of Supervisor	Title
Street Address				Your Position/Duties	
City	State	Zip	Salary		Reason For Leaving
Present Employer (or most recent)	Phone:	From Mo. Year	To Mo. Year	Name of Supervisor	Title
Street Address				Your Position/Duties	
City	State	Zip	Salary		Reason For Leaving

The information provided in the Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employee in the future

Signature: _____

Date: _____