



ASTA Hospitality, LLC

Application For Employment



APPLICANT INFORMATION											
Last Name			First			M.I.		Date			
Street Address					Apartment/Unit #						
City				State			ZIP				
Phone				E-mail Address							
Date Available			Social Security No.				Desired Pay				
Shift Desired			Position Desired			Can you work weekends?		YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Specify Hours Available For Each Day of the Week		Sunday		Monday		Tuesday		Wednesday		Thursday	
		Friday		Saturday							
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?				
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
EDUCATION											
High School			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Circle last year completed	
										1 2 3 4	
College			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Circle last year completed	
										1 2 3 4	
Other			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Circle last year completed	
										1 2 3 4	
REFERENCES											
<i>Please list three professional references.</i>											
Full Name					Relationship						
Company					Phone						
Address											
Full Name					Relationship						
Company					Phone						
Address											
Full Name					Relationship						
Company					Phone						
Address											

PREVIOUS EMPLOYMENT

Company					Phone		
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone		
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone		
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		

MILITARY SERVICE

Are you a veteran?	If yes, give the dates of service				to	
If other than honorable discharge, explain:						
In case of emergency, person to notify			Telephone Number			
Address						

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Further, I understand and agree that you will take tip credit permitted by federal law, if I am a tipped employee and my wages are less than minimum wage. Further, I understand and agree that my employment is for no definite period, regardless of the date of payment of my wages or salary, and I may terminate my employment at any time with any previous notice, and that ASTA Hospitality, LLC has a similar right.

Signature					Date	
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