

# EMPLOYMENT APPLICATION



Contact Information	
Applicant Name:	
Address (mailing):	
Email:	
Phone/Cell:	

Type of Employment	
Position:	<input type="checkbox"/> Server <input type="checkbox"/> Bartender <input type="checkbox"/> Chef / Cook <input type="checkbox"/> Barback / Busser <input type="checkbox"/> Other
Will Accept:	<input type="checkbox"/> Temporary <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Salary Desired:	\$ _____ /hr
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally entitled to work in the U.S.?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you submit proof of legal employment authorization and identify?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you are under 18, can you furnish a work permit if it is required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Availability (Days / Shifts)				
	Brunch	Afternoon	Evening	Late
Monday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tuesday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wednesday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thursday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Friday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Saturday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sunday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Employment History (past two employers)	
Employer:	
Phone:	
Dates Employed:	From: _____ To: _____
Supervisor / Title:	
May we contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Position Held:	
Job Duties:	
Last Salary:	
Reason for Leaving	

Employer:	
Phone:	
Dates Employed:	From: _____ To: _____
Supervisor / Title:	
May we contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Position Held:	
Job Duties:	
Last Salary:	
Reason for Leaving	

<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been dismissed, or asked to resign, from any position?
If YES, please explain:	

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References (list two - do not include relatives or employers)	
Name:	
Occupation:	
Relationship:	
Phone:	
Name:	
Occupation:	
Relationship:	
Phone:	

Education & Training	
Describe any job-related training, certificates & qualifications:	
High School Graduate or General Education (GED) Test Passed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Statement and Agreement (Please read and initial each statement below)
<p>_____ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.</p>
<p>_____ If hired, I understand and agree that my employment with the Company is at-will, and that neither I, nor the Company is required to continue the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.</p>
<p>_____ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.</p>

My signature below attests to the fact that I have read, understand, and agree to all of the above terms.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Interviewer's Comments:

We are an Equal Opportunity Employer. All applicants are considered without regard to any protected classification in accordance with applicable local, state and federal law. Equal access is available to all qualified persons - contact a representative if you require reasonable

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