

# APPLICATION FOR EMPLOYMENT

(Please answer all questions)  
**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

POSITION APPLIED FOR
DATE

FOR OFFICE USE ONLY	
DATE STARTED	
EMPLOYEE NUMBER	
DEPARTMENT	
Kitchen	Bar
Dining Room	Other

**NOTICE:** Applicant should read the following information carefully before filling out any of the questions on this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any purpose prohibited by law.

NAME: LAST FIRST MIDDLE

PRESENT ADDRESS CITY STATE ZIP CODE

( ) How long have you lived at the above address? \_\_\_\_\_

PHONE \_\_\_\_\_

Are you 18 years old or older?  Yes  No If not, state date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

If under age 18, how many hours per week are you employed elsewhere? \_\_\_\_\_ hours

Have you had any name changes this employer should know about in order to verify job or education history?  Yes  No Previous Name \_\_\_\_\_

Do you have transportation to and from work?  Yes  No Are you authorized to work in the U.S.?  Yes  No

Position applied for? \_\_\_\_\_ Date you can start \_\_\_\_/\_\_\_\_/\_\_\_\_ Salary desired \_\_\_\_\_

Are you applying for  Full Time  Part Time  Temporary  Days Only  Nights Only  Days/Nights

Who recommended you for this position? \_\_\_\_\_

EDUCATION						
SCHOOLING	NAME AND ADDRESS OF SCHOOL			GRADE or DEGREE COMPLETED	GRADUATE	
					YES	NO
High School						
College or University						
Others (Specify)						
Military Service Schools Attended						
Military Service Record	War Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch	From: (Date)	To: (Date)	Highest Grade	

**PLEASE CHECK THE KIND OF WORK YOU HAVE DONE:**

- |                                      |   |   |  |
|--------------------------------------|---|---|--|
| <input type="checkbox"/> Bartender   | <input type="checkbox"/> Dietitian            | <input type="checkbox"/> Pastry Cook    | <input type="checkbox"/> Wait Staff              |
| <input type="checkbox"/> Bookkeeper  | <input type="checkbox"/> Dishwasher           | <input type="checkbox"/> Porter         | <input type="checkbox"/> Wait Staff-Arm Service  |
| <input type="checkbox"/> Bus Person  | <input type="checkbox"/> Food Prep Technician | <input type="checkbox"/> Pot Washer     | <input type="checkbox"/> Wait Staff-Tray Service |
| <input type="checkbox"/> Carver      | <input type="checkbox"/> Fountain             | <input type="checkbox"/> Salad          |  |
| <input type="checkbox"/> Chef        | <input type="checkbox"/> Host or Hostess      | <input type="checkbox"/> Sandwiches     |  |
| <input type="checkbox"/> Cook        | <input type="checkbox"/> Kitchen Helper       | <input type="checkbox"/> Stenographer   |  |
| <input type="checkbox"/> Cook Helper | <input type="checkbox"/> Manager              | <input type="checkbox"/> Typist         |  |
| <input type="checkbox"/> Counter     | <input type="checkbox"/> Pantry               | <input type="checkbox"/> Vegetable Cook |  |

**-CONTINUED ON REVERSE SIDE-**

