



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

All applicants are considered without regard to race, color, gender, religion, national origin, age, marital or veteran status, sexual orientation, mental or physical disability unrelated to job performance or any other legally protected status.

POSITION APPLYING FOR: _____ **DATE:** _____

PERSONAL INFORMATION

Legal name: First _____ Last _____ Middle Initial _____

Address: Street _____ City _____ State _____ Zip code _____

Cell Telephone: _____ Home Telephone: _____

E-mail: _____ Social Security #: _____

Are you legally eligible for employment in the United States? Yes No

United States Visa status, if applicable: _____

Have you been convicted of a felony? Yes No

If yes, please explain circumstances: _____

Are you at least 18 years old? Yes No

POSITION INFORMATION

Position(s) applying for: _____ Salary desired: \$ _____

Employment status desired: Full Time Part Time Temporary

What hours are you available to work?

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

How many hours per week do you want to work? _____

If hired, when could you start? _____

How did you hear about this job? _____

I want to work here because: _____

I am the best candidate for this job because: _____

EMPLOYMENT HISTORY *(Most recent first)*

1. Job Title:		Duties:	
Company:			
Location (City, State):			
Starting Salary:	Ending Salary:		
Dates of Employment (month / year) From:		To:	
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			
2. Job Title:		Duties:	
Company:			
Location (City, State):			
Starting Salary:	Ending Salary:		
Dates of Employment (month / year) From:		To:	
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			
3. Job Title:		Duties:	
Company:			
Location (City, State):			
Starting Salary:	Ending Salary:		
Dates of Employment (month / year) From:		To:	
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			
4. Job Title:		Duties:	
Company:			
Location (City, State):			
Starting Salary:	Ending Salary:		
Dates of Employment (month / year) From:		To:	
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			

EDUCATION

Type of school	Name and Location	Dates Attended	Degree Received	Subjects Studied	Did you graduate?
High School					
College / University					
Graduate School					
Tech School					
Other					

Special courses, training or experience acquired, including military experience: _____

SKILLS

Foodservice	
Office / Computer skills	
Languages	
Other special knowledge or skills	

Please describe any other experience, abilities or skills that might be helpful in considering your application: _____

CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application are grounds for disqualification from further consideration or for dismissal from employment.

I authorize the company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position.

If employed, I agree to conform to the rules, regulations and policies of the company. I understand that I will be an employee "at will" and either the company or I may terminate my employment relationship at any time for any reason not in violation of law.

I hereby acknowledge that I have read and fully understand the forgoing and seek employment under these conditions.

Signature of Applicant

Date