

Restaurant Operations
HOURLY EMPLOYEE
APPLICATIONS FOR EMPLOYMENT

An Equal Opportunity Employer

It is the policy of The company to provide equal employment opportunity in all aspects of the employer- employee relationship — including recruitment, hiring, upgrading and promotion, conditions

and privileges of employment, company sponsored training, education, assistance, social and recreational programs, benefits and compensation, transfers and promotions, discipline, lay-offs, recalls and termination of employment - to all employees without discrimination because of race, creed, color, age, religion, sex,sexual orintation, gender identity or experssion, country of origin, veteran status, national service obligations, mental or disability or other characteristics to the extent protected by the law.

COMPANY: _____ POSITION APPLYING FOR: _____

PERSONAL			
LAST NAME	FIRST NAME	MIDDLE INITIAL	PHONE
STREET ADDRESS	CITY	STATE	ZIP CODE
NAME AND PHONE OF THE PERSON TO BE NOTIFIED IN CASE EMERGENCY			
IS YOUR CITIZENSHIP OR IMMIGRATION STATUS SUCH THAT YOU CAN LAWFULLY WORK IN THE U.S? <input type="checkbox"/> YES <input type="checkbox"/> NO			
ARE YOU: <input type="checkbox"/> 14-15 <input type="checkbox"/> 16-17 <input type="checkbox"/> 18 OR OLDER IF UNDER 18, PROOF OF AGE MUST BE PROVIDED PRIOR TO HIRING			

EDUCATION

NAME OF HIGH SCHOOL AND ADDRESS	GRADUTION		NUMBER OF COLLEGE CREDIT HOURS	MAJOR	AVERAGE
	YES	NO			
JUNIOR HIGH SCHOOL					
HIGH SCHOOL					
COLLEGE					
OTHER					
EXTRACURRICULAR ACTIVITIES	CURRENTLY ENROLLED IN HIGH SCHOOL/STUDY PROGRAM <input type="checkbox"/> YES <input type="checkbox"/> NO				

GENERAL ACTIVITIES

STARTING WAGE DESIRED \$ _____ PER HOUR	DATE AVAILABLE TO START							
DAYS AND HOURS	DAYS	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

AVAILABLE TO WORK	FORM							
TO								
WHAT INTERESTED YOU IN THE COMPANY?								
HAVE YOU EVER WORKED FOR THE COMPANY IN THE PAST? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHERE AND WHEN?								
WHAT ARE YOUR HOBBIES, SPECIAL INTERESTS AND ACTIVITIES? (Do not include those indicating race, creed, nationality or religion)								

ANY VERIFIED WORK PERFORMED ON A VOLUNTEER BASIS MAY BE INCLUDED IN YOUR WORK HISTORY

EMPLOYMENT/ WORK EXPERIENCE		
COMPANY NO.1 (Present or most recent employer)	ADDRESS/PHONE NUMBER	
EMPLOYED (Month & Year) FORMTO	RATE OF PAY START ENDING	AVERAGE NUMBER OF HOURS WORKED PER WEEK
POSITION(S) HELD	SUPERVISOR'S NAME/POSITION	
DESCRIBE YOUR DUTIES		

MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	REASON FOR LEAVING	
COMPANY NO.2	ADDRESS/PHONE NUMBER	
EMPLOYED (Month & Year)	RATE OF PAY START ENDING	AVERAGE NUMBER OF HOURS WORKED PER WEEK
POSITION(S) HELD	SUPERVISOR'S NAME/POSTION	
DESCRIBE YOUR DUTIES		
MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	REASON FOR LEAVING	
COMPANY NO.3	ADDRESS/PHONE NUMBER	
EMPLOYED (Month & Year) POSITION(S) HELD	RATE OF PAY START ENDING SUPERVISOR'S NAME/POSITION	AVERAGE NUMBER OF HOURS WORKED PER WEEK
DESCRIBE YOUR DUTIES		
MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	REASON FOR LEAVING	

Please Read Before signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge.

I authorize my previous employers, school, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature _____

Date _____