



**APPLICATION FOR EMPLOYMENT - An Equal Opportunity Employer**

<b>PERSONAL</b>	Name <small>(First)                      (Middle)                      (Last)</small>			Social Security #		
	Address <small>(Street)                      (City)                      (Zip Code)</small>			Phone # <small>(Area Code)              (Number)</small>		
	Are you 18 years of age or Older? Yes ____ No ____					
	Please Note: You will be required to provide proof of age prior to hire.					
	Have you been employed by any restaurants? Yes ____ No ____ If Yes, explain _____					
	What prompted you to apply for work here? Company Image ____ Friend ____ Relative ____ Newspaper ____ Other ____					
<b>EDUCATION</b>	<b>PERSONS TO BE NOTIFIED IN CASE OF EMERGENCY</b>					
	Name _____			Home Phone _____		
	Address _____			Work Phone _____		
	Are you legally entitled to work in U.S.? Yes ____ No ____					
	Personal interests _____					
	Have you ever been convicted of any law violation (except a minor traffic violation)? Yes ____ No ____					
If yes, give details _____ (A "Yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying will also be considered.)						
		Name and Location of School	Dates Attended From To	Circle Highest Years Completed	Major and Minor Fields of Study	Degrees or Diploma
High School				9 10 11 12 13		
Technical/Vocational School						
College/University				1 2 3 4		
Other						
Honors Received						

<b>AVAILABILITY FOR WORK</b>	WHAT HOURS ARE YOU AVAILABLE FOR WORK?		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
		From									
		To									
	Type of Schedule Desired	Part Time <input type="checkbox"/>			Full Time <input type="checkbox"/>						
	Do you plan to work elsewhere or attend school while employed here?					Do you have any obligations which would affect working as scheduled?					
How soon after accepting an offer would you be able to start working?											
<b>EXPERIENCE</b>	Employer				Phone			From	To		
	Address						Position				
	Responsibilities						Supervisor's Name				
							Starting Salary/Wages				
							Final Salary/Wages				
	Reason for Leaving					May we contact?					
	Employer				Phone			From	To		
	Address						Position				
	Responsibilities						Supervisor's Name				
							Starting Salary/Wages				
							Final Salary/Wages				
	Reason for Leaving					May we contact?					
	Employer				Phone			From	To		
	Address						Position				
	Responsibilities						Supervisor's Name				
							Starting Salary/Wages				
							Final Salary/Wages				
	Reason for Leaving					May we contact?					
	<b>IMPORTANT</b>	<p>I certify that the statements made by me in this application are true and complete. I understand and agree that a false statement, a material omission or any omission which may make stated information false may disqualify me from employment or result in summary dismissal.</p> <p>I hereby authorize you to obtain from the persons/entities referred to above any and all information which they may have relevant to the employment sought by me. I hereby release you and all persons/entities giving such information from any all liability (except liability for malice) connected with such giving.</p>									
		Signature _____				Date _____					