

APPLICATION FOR EMPLOYMENT

DATE _____



Personal Information

Name (Last Name First)	Phone #	Date of Birth	
Present Address	City	State	Zip Code

Employment desired

Position	Date you can start	Salary desired	
Are you employed ?	Yes No	If so, may we inquire of your present employer	Yes No
Alcohol Servers #	Expiration Date		

Education History

	Name & location of school	Years attended	Did you graduate?	Subject studied
High School				
College				

General Information

training, pos skills, special restaurant experience

Former Employers

Date Month & Year	Name & Address of employer	contact & phone #	Position	Reason for leaving
From				
To				
From				
To				
From				
To				
From				
To				

References

Name	Address	Phone #	Business	Years Known

AVAILABILITY /(Lunch 10-5, Dinner 4-10, Mon-Sun) The more flexibility you have to offer

the more attractive your application

Date : _____

Signature : _____

Interviewed by : _____

Date : _____

DO NOT WRITE BELOW THIS LINE

Remarks

Proposed Schedule