

APPLICATION FOR EMPLOYMENT

DATE _____



Personal Information

Name (Last Name, First Name)		Phone #	Social Security #
Present Address		City	State Zip Code
Email Address:			

Employment desired

Position	Date you can start	Salary desired
Are you employed ?	Yes No	If so, may we inquire of your present employer
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 9:30-4, Dinner 4-10, Sun 8-3) The more flexibility you have to offer the more attractive your application becomes.

Date : _____

Signature : _____

Interviewed by : _____

Date : _____

_____ DO NOT WRITE BELOW THIS LINE _____

Remarks

Proposed Schedule