



EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apt/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No. XXX-XX- _____		Desired Salary \$	
Position Applied for (Circle all that apply)		KITCHEN STAFF		FLOOR STAFF	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain...	
Are you over the Age of 18? ___ Yes / ___ No		Are you over the age of 21? ___Yes / ___No			

EDUCATION

<u>High School</u>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<u>College</u>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<u>Other</u>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

<u>Full Name</u>		Relationship
Company		Phone ()
Address		
<u>Full Name</u>		Relationship
Company		Phone ()
Address		
<u>Full Name</u>		Relationship
Company		Phone ()
Address		

My Availability:

Mon AM ___ Tues AM ___ Weds AM ___ Thurs AM ___ Fri AM ___ Sat AM ___ Sun AM ___
 PM ___ PM ___ PM ___ PM ___ PM ___ PM ___ PM ___

EMERGENCY CONTACT INFORMATION

Full Name of Contact		Relationship
Phone No. ()	Address	

PREVIOUS EMPLOYMENT

<u>Company</u>		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
<u>Company</u>		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
<u>Company</u>		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

SURVEY

Briefly explain why you believe you should be employed by the Sports Grill.

What do you feel you can bring to us that no-one else can bring?

Do you have any special interests? (i.e. sports, activities ,skills, clubs, hobbies, certifications)

Certifications:

Safe Staff YES NO

Certified Professional Food Manager YES NO

PERSONAL

Are you a current drug user? YES NO

Describe your alcohol intake. (circle one) 1 2 3 4 5 6 7 8 9 10

<1- Do not drink 5-once or twice a week 10- daily>

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

Sports Grill provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital status, or amnesty. Sports Grill complies with applicable state and local laws governing non-discrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date