

# Employment Application

## Equal Opportunity Employer

### Personal Information

|                 |            |                                 |
|-----------------|------------|---------------------------------|
| Last Name       | First Name | Social Security Number (Last 4) |
| Street Address  |            | Home Phone                      |
| City, State ZIP |            | Cell Phone                      |
| Referred by     |            | eMail                           |

### Employment Desired

|  |  |                    |
|--|--|--------------------|
| Position Desired   | Wage Desired   | Date you can start |
| Type of employment sought (check all that apply)<br>Full Time – 30 to 50 hours per week<br>Part Time – Regularly scheduled hours less than full time<br>Casual – Scheduled as needed for catering events | Availability (number of hours sought / schedule restrictions<br>e.g. weekends twice a month, MWF, June to Sept...) |                    |
| Are you currently employed? Yes/No   |  |                    |
| May we inquire of your current employer? Yes/No  |  |                    |

### Employment History (please list your last four employers)

| Date (month / year) | Name & Location | Position | Reason for leaving |
|---------------------|-----------------|----------|--------------------|
| From<br>To          |                 |          |                    |
| From<br>To          |                 |          |                    |
| From<br>To          |                 |          |                    |
| From<br>To          |                 |          |                    |

### Education History

| Name of School & Location          | Years Attended | Did you graduate? | Subjects |
|------------------------------------|----------------|-------------------|----------|
| College / Trade School / Specialty |                |                   |          |
| College / Trade School / Specialty |                |                   |          |
| High School                        |                |                   |          |

### References (non-family members, preferably professional references)

| Name | Phone | Business / Relationship | Years Known |
|------|-------|-------------------------|-------------|
|      |       |                         |             |
|      |       |                         |             |
|      |       |                         |             |

I certify the facts contained in the application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize the investigation of statements contained herein and employers listed above to provide any and all information concerning my previous employment and release the company from any damage that may result from the use of such information. I understand that no representative of the company has any authority to enter into an employment relationship unless in writing and signed by an authorized representative. This waiver does not permit the release or use of disability or medical information in a manner prohibited by federal or state law.

Date \_\_\_\_\_ Signature \_\_\_\_\_