

APPLICATION FOR EMPLOYMENT



To be considered for employment, you must fill out this application COMPLETELY Please write N/A if information sought is not applicable. Resumes, while welcome, should NOT be submitted in place of the information below.

PERMANENT ADDRESS: STREET/PO BOX APT # CITY STATE 4TP CELL PHONE NOME PHONE NOME PHONE NAME AND ADDRESS: CELL PHONE NOME PHONE NAME YOU ARE AVOID NEED TO MAKE? S			-	SE PRINT						
EXECUTION STATE CITY STATE 200	FIRST NAME	MIDDLE INITIAL	LAST NAME		SOCIAL SECURITY NU	MBER	TODAY	S DATE		
## HOME PHONE HOME PHONE PART YOU ARE YOU ARE AVAILABLE FOR EMPLOYMENT? ## WHAT ISTHE MINIMUM AMOUNT OF MONEY YOU NEED TO MAKE? \$ HOUR And \$ WEEK 1. If hired, can you submit, for examination and copying, documents required to prove your identity and legal eligibility to work in the United States? Yes No 2. Are you of legal age to work in this state? Yes No 3. Are you of legal age to serve alcohol in this state? Yes No 5. Have you submit proof of age? Yes No 5. Have you been convicted of a felony that has NOT been annulled, expunged, or sealed by the court? Yes No 6. How many jobs have you had in the last two years? Zero One Two Three 4 or more 7. Have you ever been terminated from a job? Part-time (hours/week) Full-time (hours/week) 9. Do you presently have a job that you intend to keep, if hired? Yes No 10. Using the table below, please indicate the days you CAN work. List the earliest and latest time you CAN work. Please account for travel time to and from other obligations (e.g., sports, classes, meetings, other employment, etc.). EARLIEST TIME IN LATEST TIME IN LATEST TIME IN LATEST TIME IN LATEST TIME OUT Thus Yes No 13. We may conduct training on days, or at times, you have other obligations. Is your schedule flexible so that you may attend all training necessary for the position applied for? Yes No 14. Are you or do you plan to be, in school or taking courses at any time while working here? Yes No 15. What commitments do you have, or do you anticipate, that may affect your schedule? Yes No 16. Education Name and Location of School Dates Last year Major/Specialty Degree No 17. Page and Location of School Dates Last year Major/Specialty Degree No No Name and Location of School Dates Last year Major/Specialty Degree No Name and Location of School Dates Last year Major/Specialty Degree No Name and Location of School Dates L	CURRENT ADDRESS:	\$ TREET/PO BOX	APT #		CITY		STATE		ZIP	
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College/ Other					



APPLICATION FOR EMPLOYMENT

Sports Bar & Grill

Page 2, continued

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Address			.8'								
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Job Duties											
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