



APPLICATION FOR EMPLOYMENT  
AN EQUAL OPPORTUNITY EMPLOYER

RESTAURANT & CATERING

Personal Information

Name (Last Name First)		Email Address	
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Phone Number		Referred By:	
Are you at Least 18 Year of Age or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employment Desired

Position	Date You Can Start	Salary Desired
Are you Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ever applied to this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?

Education History

Name & Location of School	Years Attended	Did you Graduate?	Subjects Studied
Grammar School			
High School			
College			
Trade, Business or Correspondence School			

General Information

Subjects of Special Study/Research Work or Special Training Skills	
U.S Military or Naval Service	Rank

CONTINUED ON THE OTHER SIDE

Former Employers

Date Month & Year	Name & Address of Former Employer	Salary	Position	Reason For Leaving
From:				
To:				
From:				
To:				
From:				
To:				

References

Name	Address	Business	Years Known

Authorization

“I certify that the facts contained in this 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 investigation of all statements contained herein and the reference and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for nay damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.”

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

----- DO NOT WRITE BELOW THIS LINE -----

Interviewed By \_\_\_\_\_  
Date \_\_\_\_\_

Remarks  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Neatness			Character	
Personality			Ability	
Hired	For Dept.	Position	Will Report	Salary Wages

Approved 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
Employment Manager Department Head General Manager