 Employment Application

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| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_  |
| Address:\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_ State: Zip Code: \_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_  E-mail Address: \_\_\_\_\_\_\_\_\_\_\_  |
| How did you hear of us? \_\_\_\_\_\_\_\_\_\_\_ Do you have any dietary restrictions or food allergies? No: Yes:Are you vaccinated against COVID-19? Yes NoDo you have past experience in the hospitality industry? No Yes (how many years): \_\_\_\_\_\_\_\_\_\_\_ Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you have past experience in customer service? No Yes (how many years): \_\_\_\_\_\_\_\_\_\_\_ Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ What appeals to you about this job? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do you know anyone who works or who has worked here before? Have you ever been convicted of a felony? No: Yes (explain): |
| Primarily Interested In: Baker Position / Sales PositionI would commute to work by: Foot / Bus / My Own Vehicle / Other: Available Start Date: Requested Hourly Wage:  | * Part-time (desired hrs/wk: \_\_\_\_)
* Full-time (desired hrs/wk: \_\_\_\_)

I anticipate working in my next position for the next: * 1-3 months
* 3-6 months
* 6-12 months
* Year or more
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Education:

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| School Name and City | Graduated Yes / No; anticipated graduation date | Degree Received |
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References:

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| Name | Title and Company | Phone/ E-mail  |
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* I am legally authorized to work in the United States
	+ By checking here, I acknowledge and certify that all answers given herein are true and complete to the best of my knowledge.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_