



Application for Employment

EQUAL OPPORTUNITY EMPLOYER: *We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.*

**** PLEASE PRINT CLEARLY ****

Position(s) applied for _____ Date ____/____/____

Applicant Information

First Name _____ Middle _____ Last _____

Street Address _____ Social Security No. _____

City/State/Zip _____ Cell Phone # (____) _____

Home Phone # (____) _____

Are you at least 18 years old? ___ If you are under 18 years of age, can you furnish a work permit? _____

Are you legally eligible for employment in the U.S.? _____ (Proof of U.S. citizenship or immigration status is required if hired.)

Have you been convicted of a crime? (Massachusetts applicants should not include misdemeanor convictions.)

Yes No If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

Employment Information

Have you completed any restaurant/alcohol training courses? Yes / No

If so, please list: _____ Desired hours per week _____

List times you are **NOT** available:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM						
PM						

Are you currently employed? _____ If hired, when would you be able to start? _____

Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8 Secondary: 9 10 11 12 G.E.D

College: 1 2 3 4 5 6 7 8

High School _____ Location _____ Graduated Yes/ No

College/Trade School _____ Location _____ Graduated Yes/No

Are you currently a student? Yes / No If so, when do classes resume: _____

Employment Record (list most recent first)

1. Company _____ Phone No. with Area Code (_____)
Address _____ City/State/Zip _____
Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____
Job Title _____ Supervisor's Name & Title _____
Describe duties briefly: _____
Specific reason for leaving: _____
2. Company _____ Phone No. with Area Code (_____)
Address _____ City/State/Zip _____
Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____
Job Title _____ Supervisor's Name & Title _____
Describe duties briefly: _____
Specific reason for leaving: _____

References (list 2 or 3 references (not a relative or former employer) whom you have known for at least 5 years)

1. Name _____ Occupation _____ Phone _____
2. Name _____ Occupation _____ Phone _____
3. Name _____ Occupation _____ Phone _____

Please read the following carefully. Your signature below is required, and acknowledges you have read, understood and agreed to the information.

I certify that the information contained in this application is true, complete and accurate.

I authorize investigation of all statements contained in this application form if I am considered for employment. I also authorize previous employers, personal references named, or any other person whom the company may contact, to give any and all information regarding my employment or any other information, personal or otherwise, that may or may not be on their records. I fully release all persons and entities from any and all liability or potential claims resulting from the disclosure, use or dissemination of any such information whether it is favorable or unfavorable.

I understand that misrepresentation or material omission of the facts called for herein or receipt of unsatisfactory references may result in disqualification from employment, or, if I am hired, my dismissal of employment.

I also understand that any job that I am offered will not be for any set period of time. My employment may be terminated at any time. My employment may be terminated at any time of my own free will or the will of my employer, either with or without cause or advance notice. I further understand that this policy cannot be changed except in writing and then only when signed by me and the company owner and then only where it specifically addresses my "at will" status. I agree that this "at will" condition will be a part of any employment relationship and that this provision is merged into any agreement regarding my employment.

Signature _____ Date _____

Name (please print) _____