



APPLICANT INFORMATION					
Last Name		First	M.I.	Date	
Street Address			Apartment/Unit #		
City		State	ZIP		
Phone		E-mail Address			
Date Available	Social Security No.		Desired Salary		
Position Applied for	Cashier <input type="checkbox"/>	Buser <input type="checkbox"/>	Line Cook <input type="checkbox"/>	Prep Cook <input type="checkbox"/>	Dishwasher <input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

**PREVIOUS EMPLOYMENT**

<b>Company</b>		<b>Phone ( )</b>	
<b>Address</b>		<b>Supervisor</b>	
<b>Job Title</b>	<b>Starting Salary \$</b>	<b>Ending Salary \$</b>	
<b>Responsibilities</b>			
<b>From</b>	<b>To</b>	<b>Reason for Leaving</b>	
<b>May we contact your previous supervisor for a reference?</b>		<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>
<b>Company</b>		<b>Phone ( )</b>	
<b>Address</b>		<b>Supervisor</b>	
<b>Job Title</b>	<b>Starting Salary \$</b>	<b>Ending Salary \$</b>	
<b>Responsibilities</b>			
<b>From</b>	<b>To</b>	<b>Reason for Leaving</b>	
<b>May we contact your previous supervisor for a reference?</b>		<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>
<b>Company</b>		<b>Phone ( )</b>	
<b>Address</b>		<b>Supervisor</b>	
<b>Job Title</b>	<b>Starting Salary \$</b>	<b>Ending Salary \$</b>	
<b>Responsibilities</b>			
<b>From</b>	<b>To</b>	<b>Reason for Leaving</b>	
<b>May we contact your previous supervisor for a reference?</b>		<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>

**MILITARY SERVICE**

<b>Branch</b>	<b>From</b>	<b>To</b>
<b>Rank at Discharge</b>	<b>Type of Discharge</b>	
<b>If other than honorable, explain</b>		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

<b>Signature</b>	<b>Date</b>
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