



EMPLOYER:	JOB TITLE:
PHONE NUMBER:	SUPERVISOR'S NAME:
ADDRESS:	STARTING PAY (hourly) \$                      ENDING PAY \$
EMPLOYMENT DATES (mo/yr): FROM:                      TO:	MAY WE CONTACT FOR A REFERENCE?                      YES                      NO
DUTIES:	REASON FOR LEAVING:

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OTHER THAN THE EMPLOYMENT DESCRIBED ABOVE, PLEASE BRIEFLY DESCRIBE ANY OTHER EMPLOYMENT YOU HAVE HELD IN THE RESTAURANT INDUSTRY:
BRIEFLY DESCRIBE ANY OTHER REASONS OR EXPERIENCE THAT DEMONSTRATES WHY YOU BELIEVE YOU ARE QUALIFIED FOR EMPLOYMENT WITH US:

**PERSONAL REFERENCES**

(LIST 3 PERSONS NOT RELATED TO YOU WHO HAVE KNOWLEDGE OF YOUR WORK PERFORMANCE WITHIN THE LAST 3 YEARS.)

NAME:	TELEPHONE NUMBER:
ADDRESS:	COMPANY:
OCCUPATION:	NUMBER OF YEARS ACQUAINTED:

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**PLEASE READ BEFORE SIGNING**

<p>I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing which, if disclosed, would alter the integrity of this application.</p> <p>I authorize my previous employers, schools or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment terminated because of false statements, omissions or answers made by myself on this application. In the event of any employment with this company I will comply with all rules and regulations as set by the company in any communication distributed to the employees.</p> <p>In compliance with the immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company, which verifies my right to work in the United States on the first day of employment. I have received from the company a list of the approved documents which are required.</p> <p>I understand that employment at this company is "at will" which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.</p> <p>SIGNATURE: _____ DATE: _____</p>
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