



Employment Application

Date: _____

Important, please read:

THIS COMPANY DOES NOT DISCRIMINATE ON THE BASIS OF AGE, RACE, CREED, COLOR, NATIONALITY, RELIGION, DISABILITY OR SEX. IT IS IN COMPLIANCE WITH THE IMMIGRATION REFORM ACT. IF HIRED, BEFORE YOU WILL BE ALLOWED TO BEGIN WORK, YOU WILL BE ASKED TO COMPLETE AN I-9 FORM AND PROVIDE TWO (2) PIECES OF VALID IDENTIFICATION (SUCH AS A DRIVER'S LICENSE AND SOCIAL SECURITY CARD). EXPIRED DOCUMENTS WILL NOT BE ACCEPTED.

Last Name: _____ First: _____ Middle: _____
Street Address (incl. Zip Code): _____
Home Telephone: () _____ Work/Cell Telephone: () _____
Social Security Number: _____ Date Available To Start Work: _____
Position Applying For: (check all that apply) foodservice front counter maintenance other _____

Are you legally eligible for employment in the United States? _____
Have you ever been convicted of or pled guilty or no contest to a crime (felony or misdemeanor)? _____ If yes, where, when, what offense(s): _____

Have you ever been convicted of driving a motor vehicle while intoxicated or refusing to submit to a blood alcohol test or any other serious traffic offense? _____ If yes, please explain: _____

Are you currently out on bail or on your own recognizance pending trial for any offense? _____ If yes, please explain: _____

High School. Name of Last School: _____ Circle highest year completed: 9 10 11 12
Location: _____ Date Graduated/Left: _____

College or University. Name: _____ Years Attended: _____ Degree: _____
Location: _____ Date Graduated/Left: _____

Other. Name: _____ Years Attended: _____ Degree: _____
Location: _____ Date Graduated/Left: _____

EMPLOYMENT RECORD

Give a complete account of your full-time employment. Begin with your current or most recent position and work back. Use additional sheets of paper if necessary.

1. Company: _____ Address: _____
Phone: () _____ Supervisor: _____ Position: _____
Employed From – To: _____ - _____ Reason For Leaving: _____
Begin Salary: _____ per _____ End Salary: _____ per _____ Describe Your Work: _____

2. Company: _____ Address: _____
Phone: () _____ Supervisor: _____ Position: _____
Employed From – To: _____ - _____ Reason For Leaving: _____
Begin Salary: _____ per _____ End Salary: _____ per _____ Describe Your Work: _____

3. Company: _____ Address: _____
Phone: () _____ Supervisor: _____ Position: _____
Employed From – To: _____ - _____ Reason For Leaving: _____
Begin Salary: _____ per _____ End Salary: _____ per _____ Describe Your Work: _____

Do you use tobacco products of any kind? Please check one only. No Yes

If offered a position, would you consent to a drug test? Please check one only. No Yes

We may contact the employers listed above unless you indicate those you do not want us to contact:

Employer Number(s) _____ Reason: _____

Employer Number(s) _____ Reason: _____

Employer Number(s) _____ Reason: _____

Employer Number(s) _____ Reason: _____

I understand that this is a preliminary application and that I may be interviewed and have my references checked. I herewith authorize and request each and every former employer, person, firm or corporation to answer any and all questions that may be asked and herewith hold such persons harmless for giving any and all information within their knowledge and records. This inquiry includes information as to my character, general reputation, personal characteristics and experience. Midtown Bowl will also use E-Verify, a program that electronically confirms an employee's eligibility to work in the United States after completion of Form I-9, Employment Eligibility Verification, via the Department of Homeland Security. I have the right to make a written request within a reasonable period of time for complete and accurate disclosure of additional information concerning the nature and scope of this investigation. All of the information listed by me on this application is true and correct to the best of my knowledge. I understand that any false or misleading statements may be cause for rejection of my application and/or if employed, may be just cause for subsequent dismissal.

Signature

Date