

Life's a Beach Grill

2420 F.M. 407 Highland Village, TX 75077 (972) 317-2212
APPLICATION FOR EMPLOYMENT - EQUAL OPPORTUNITY EMPLOYER

DATE _____

NAME _____ SOCIAL SECURITY # _____-____-_____

PRESENT ADDRESS _____ CITY/STATE/ZIP _____

HOME PHONE: _____ REFERRED BY: _____

POSITION DESIRED _____ DATE YOU CAN START _____

ARE YOU OVER 18 YEARS OLD? IF NOT, PLEASE SPECIFY DATE OF BIRTH _____

ARE YOU EMPLOYED? YES NO IF 'YES' MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

HIGH SCHOOL ATTENDED OR ATTENDING _____

YEARS AT _____

COLLEGE ATTENDED OR ATTENDING _____

YEARS AT _____

DID YOU GRADUATE? _____

SUBJECTS STUDIED: _____

DO YOU HAVE ANY SPECIAL SKILLS OR TRAINING? _____

PLEASE LIST ALL FORMER EMPLOYERS STARTING WITH THE MOST RECENT JOB

1. NAME OF EMPLOYER _____ FROM _____ TO _____

NAME OF SUPERVISOR _____ PHONE NUMBER _____

REASON FOR LEAVING _____

2. NAME OF EMPLOYER _____ FROM _____ TO _____

NAME OF SUPERVISOR _____ PHONE NUMBER _____

REASON FOR LEAVING _____

IF YOU WERE HIRED, WHAT ARE THE DAYS YOU ARE AVAILABLE FOR WORK:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Place an "X" in the box on days you CAN NOT work

PLEASE GIVE TWO REFERENCES OF PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR:

1. NAME _____ PHONE NUMBER _____

2. NAME _____ PHONE NUMBER _____

DO YOU HAVE ANY SCHEDULING CONFLICTS SUCH AS OTHER EMPLOYMENT, OR SCHOOL ACTIVITIES THAT WOULD INTERFERE WITH YOUR SCHEDULE HERE? PLEASE NOTE THE DAY AND TIME OF ACTIVITIES:

EMERGENCY CONTACT NUMBER:

NAME:

PHONE NUMBER:

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED; FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.

DATE: _____ SIGNATURE _____

INTERVIEWED BY _____ DATE: _____

REMARKS:

HIRE DATE: _____