



**SOUTHWEST KITCHEN
& TEQUILA BAR**

APPLICATION FOR EMPLOYMENT

We consider applicants for all position without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

PERSONAL INFORMATION *(PLEASE PRINT LEGIBLY)*

Position Applied For _____ Date of Application _____

Last Name _____ First Name _____ Middle Name _____

Address _____ Street _____ City _____ State _____ Zip Code _____

Telephone Number(s) _____ Social Security Number _____

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please describe the nature of the crime(s): _____

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?

Yes No

How were you referred to the company? _____

Have you ever been employed with us before? Yes No Dates employed: _____

Date available for work: ____/____/____ What is your desired salary range? _____

Please list days available for work. (Please indicate for each day whether: day or evening shift)

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____

EDUCATION, TRAINING AND EXPERIENCE

High School

School Name: _____

Location: _____

Years completed: _____

Military

Branch/Rank: _____

Years of Service: _____

Skills/Duties: _____

College / University

School Name: _____ Number of years completed: _____

Location: _____

Did you graduate? Yes No Degree/diploma earned: _____

EMPLOYMENT HISTORY (PLEASE PRINT LEGIBLY)

Are you currently employed: () Yes () No

Below, please describe past and present employment positions, dating back five years. Please account for all periods of unemployment.

Name of Employer: _____ Business Type: _____

Telephone Number: _____ Name of Supervisor: _____

Address _____ Street _____ City _____ State _____ Zip Code _____

Length of Employment: From ____/____/____ To ____/____/____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? () Yes () No

Name of Employer: _____ Business Type: _____

Telephone Number: _____ Name of Supervisor: _____

Address _____ Street _____ City _____ State _____ Zip Code _____

Length of Employment: From ____/____/____ To ____/____/____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? () Yes () No

Name of Employer: _____ Business Type: _____

Telephone Number: _____ Name of Supervisor: _____

Address _____ Street _____ City _____ State _____ Zip Code _____

Length of Employment: From ____/____/____ To ____/____/____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? () Yes () No

Please read and initial each paragraph, then sign below.

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure employment can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company. _____

I understand that this application is not an employment contract, and termination can occur with or without cause and/or reason. _____

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or the company. _____

I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out or in any way related to such examination or revelation. _____

SIGNATURE _____

DATE _____