

Application for Employment
We consider applicants for all positions without regard to race,

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

Please Print Clearly!

Position app	lied for:	Server	Line Coo	ok 🔲]	Hostess	Dish		
How did you	ı find out ab	out this job:	Employ	ee 🔲 Cla	ssifieds	Walk-in	Relative	
Applica	ant Info	ormatio	<u>n</u>					
First Name:				Last:_				
					Social Security No.:			
				Phone: ()				
If hired, do y	ou have a rel	liable means o	f transportati	on to get to v	work? Yes	No		
Are you at le	ast 18 years-c	old? Yes _	No If you'r	e not at least 18	years-old yo	u will need to furn	ish a work permit.	
Are you legal	ly eligible for	r employment	in the U.S.?	Yes N	lo			
(Proof of U.S. citizenship or immigration status is required if hired.)								
Have you ever been convicted of a crime? Tes No								
If yes, state the nature of the offense and disposition of the case. Include dates and places. (Note: The existence of a criminal record does not constitute an automatic bar of employment.								
Employment Information								
Are you currently employed? Yes No If hired, when would you be able to start?								
List any friends or relatives that are currently employed with Marty's Grill:								
Have you ev	er been disch	arged or asked	l to resign fro	om any positi	on ? 🔲 Y	es No		
If yes, please des	cribe:							
Shift	Monday		lease List You Wednesday		•	Saturday	Sunday	
BREAKFAST								
LUNCH								
DINNER								
Educat	ion (check	the highest leve	el achieved)					
Secondary: [9 🔲 10 [11 12	College:	1 🔲 2 🔲	3 4			
School:			School:		Degree:			
Location:			Location: _					

Work History (please begin with current or most recent) Company: _____ Phone No. (____) ____ Address: _____ City/State/Zip____ Dates of Employment: From:______ To: _____ Salary: Start \$ ____ End \$ _____ Describe duties & responsibilities: Reason for leaving: Company: _____ Phone No. (____) ___ Address: City/State/Zip Dates of Employment: From:______ To: _____ Salary: Start \$ ____ End \$ _____ Iob Title: Describe duties & responsibilities: Reason for leaving: Company: _____ Phone No. (____) ____ Address: _____ City/State/Zip____ Dates of Employment: From: To: Salary: Start \$ ____ End \$ Describe duties & responsibilities: Reason for leaving: May we contact the employers listed above? If not, list the employers you do not wish us to contact and why: Authorization & At-Will Employment Agreement I certify that I have personally completed this application and declare all information true and complete. I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. Upon termination of my employment, for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer. I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any thereafter. Signature ____ Date