



EMPLOYMENT APPLICATION

Date: _____

First Name _____ MI _____ Last Name _____

Home Phone Number (____) _____ Cell Number (____) _____

Address _____ City _____ State _____ Zip Code _____

Email _____ Social Security Number _____

Are you 18? **Yes / No** If not birth date ___ / ___ / ___ Referred by _____

Have you ever worked for City Grille before? If yes, when? _____

If yes, reason for leaving? _____

Employment Desired

Position _____ Date available to start _____ Salary desired _____

Availability: Total hours available per week _____ Days Available M T W Th F S S

Are you **LEGALLY ABLE** to be employed in the U.S. **Yes/ No**

How did you hear about this employment opportunity? _____

How far do you live from restaurant? _____ If hired would you have transportation to/ from work? _____

Education History:

	Name & Location of School	Years Attended	Did you Graduate	Subjects Studied
HIGH SCHOOL	_____	_____	_____	_____
COLLEGE	_____	_____	_____	_____
OTHER	_____	_____	_____	_____

Teacher or Counselor we may contact as a reference Yes/No? Phone Number(____) _____

U. S. Military: Branch of Service: _____

Date entered: _____ Date of Discharge: _____ Highest Rank: _____

What other relevant experience or training have you had and what activities are you involved in?

Employment History:

May we contact your present employer? Yes/ No

1) **Company** _____

Address _____ City _____ State _____ Zip _____

Phone Number (____) _____ Job Title _____

Supervisor _____ Dates Worked: From _____ To _____

Rate of Pay _____ per hour Reason for leaving _____

2) **Company** _____

Address _____ City _____ State _____ Zip _____

Phone Number(____) _____ Job Title _____

Supervisor _____ Dates Worked: From _____ To _____

Rate of Pay _____ per hour Reason for leaving _____

3) **Company** _____

Address _____ City _____ State _____ Zip _____

Phone Number(____) _____ Job Title _____

Supervisor _____ Dates Worked: From _____ To _____

Rate of Pay _____ per hour Reason for leaving _____

If you do not have three previous employers, please provide personal references above and indicate as such. These would be individuals not related to you and who you have known for more than one year.

- ❖ DURING THE PAST 5 YEARS, HAVE YOU BEEN CONVICTED OF, PLED GUILTY TO OR PLED NO CONTEST TO A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATION? **Yes/ No**
IF YES, DESCRIBE IN FULL _____

*Answering yes will not necessarily bar you from employment. Applicants are not required to disclose sealed or expunged conviction records or the existence of such.

- ❖ ARE YOU OR HAVE YOU EVER BEEN A SEX OFFENDER REGISTERED WITH AND FEDERAL, STATE OR LOCAL GOVERNMENT AGENCY, INCLUDING ANY LISTING ON A PUBLIC WEBSITE? **Yes/ No**
- ❖ The Secretary of Health and Human Services has determined that certain diseases, including Hepatitis A, salmonella, shigella, staphylococcus, streptococcus, giardia, E.Coli, and campylobacter may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves handling and serving food, food service equipment and utensils in a sanitary and healthy fashion. Is there any reason why you cannot perform the essential functions of this job? **Yes/ No**

If yes, please explain _____

- ❖ U.S. law requires that, if hired, you must furnish appropriate documentation establishing identity and employment eligibility, generally within 72 hours of starting work. For example, acceptable documents include: a passport, or IN 688A; a Social Security Card or birth certificate issued by government authority and a drivers license, school I.D. with photo or other government issued documentation establishing identity. Certain other documents are equally acceptable. Please consult a member of the management team and ask them for a copy of the INS Form I-9 for a list of these documents.

CERTIFICATION AND ACKNOWLEDGEMENTS

1. I certify that I have read this application and the information on it is complete and correct. I understand that any omissions or misrepresentation of information is grounds for dismissal.
2. I authorize the persons, employers, schools, and organizations listed on this application to give you any information concerning my employment and other pertinent information they may have, personal and otherwise, and release all parties from all liability and damages that may result from furnishing this to you.
3. I acknowledge that City Grille reserves the right to amend or modify any of its handbooks or policies at any time without prior notice. These policies do not create any promises or contractual rights between City Grille and its employees. At City Grille, employment is at will. This means an employee is free to terminate his/her employment at any time, without any reason, with or without cause, and City Grille retains these same rights.
4. City Grille is an Equal Opportunity Employer. Various federal, state, and local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability, sexual orientation, veteran status or other protected categories. It is City Grille's policy to comply fully with these laws, as applicable, and information requested on this application with not be used for any purpose prohibited by law.

Signature _____ Date _____