



the sandwich box

FOR OFFICE USE ONLY

EMP. NO. _____

W4 _____

APPLICATION FOR EMPLOYMENT

FOR GENERAL RESTAURANT WORK

PERSONAL INFORMATION PLEASE PRINT CLEARLY

NAME _____ SOC. SEC. # / TAX ID NO. _____
FIRST MIDDLE LAST

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

TELEPHONE () _____ REFERRED BY: AGENCY / EMPLOYEE / AD / OTHER _____
(CIRCLE ANSWER)

Are you over 18 years of age? YES / NO (CIRCLE ANSWER) [If NO, a work permit is required.]

Are you legally able to be employed in this country? YES / NO (If hired, verification will be required by law)

Have you been convicted of a felony? YES / NO [Conviction will not necessarily disqualify an applicant from employment]

if YES, please explain _____

In Case of Emergency Notify:

NAME _____ TELEPHONE () _____
FIRST MIDDLE LAST

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

AVAILABILITY

What type of position are you seeking? PART TIME / FULL TIME / SEASONAL / TEMPORARY (CIRCLE ANSWER)

Are you able to meet the attendance requirements of the position? YES / NO

		M	T	W	TH	F	S
HOURS AVAILABLE	FROM						
	TO						

Total hours available per week _____

Date available to start work _____

EDUCATION MOST RECENTLY ATTENDED

NAME OF SCHOOL _____ CITY, STATE _____

LAST GRADE COMPLETED _____ GRADE AVERAGE _____

GRADUATED? YES / NO [If YES, when? _____] NOW ENROLLED? YES / NO (CIRCLE ANSWER)

EMPLOYMENT MOST RECENT EMPLOYMENT (CONTINUED ON REVERSE SIDE)

COMPANY _____ ADDRESS _____

CITY _____ STATE _____ TELEPHONE () _____

POSITION _____ SUPERVISOR _____ DATES WORKED FROM _____ TO _____

WAGE _____ REASON FOR LEAVING _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

RACE, COLOR, RELIGION, AGE, SEX, AND NATIONAL ORIGIN ARE NOT FACTORS IN EMPLOYMENT, PROMOTION AND COMPENSATION

PLEASE COMPLETE REVERSE SIDE

EMPLOYMENT MOST RECENT EMPLOYMENT (CONTINUED ON REVERSE SIDE)

COMPANY _____ ADDRESS _____
CITY _____ STATE _____ TELEPHONE (____) _____
POSITION _____ SUPERVISOR _____ DATES WORKED FROM _____ TO _____
WAGE _____ REASON FOR LEAVING _____

Do we have your permission to contact your current employer? YES / NO (CIRCLE ANSWER)

If NO, please explain _____

[IF YOU NEED ADDITIONAL SPACE FOR EMPLOYMENT HISTORY, PLEASE ATTACH A SEPARATE SHEET]

REFERENCES

NAME _____ TELEPHONE _____ YEARS KNOWN _____
ADDRESS _____ CITY _____ STATE _____
NAME _____ TELEPHONE _____ YEARS KNOWN _____
ADDRESS _____ CITY _____ STATE _____

PLEASE READ BEFORE SIGNING

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing which, if disclosed, would affect this application unfavorably.

I authorize my previous employers, schools or persons named as references to give any information regarding employment or educational record. I agree that this company and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn or my employment is terminated because of false statements, omissions or answers made by me on this application. In the event of my employment with this company I comply with all rules and regulations as set forth in any communication distributed to employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I will be required to provide approved documentation that verifies my right to work in the United States on my first day of employment. I am in receipt of a list of approved documents which have been supplied with this application.

I further understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of wages or salary, be terminated for any reason and at any time without previous notice.

I hereby acknowledge that I have read and understand the above statements.

SIGNATURE _____ DATE _____

INTERVIEWED BY _____ DATE _____

REMARKS **DO NOT WRITE BELOW THIS LINE**

HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES

APPROVED BY: _____ DATE _____