



**AN EQUAL OPPORTUNITY EMPLOYER  
APPLICATION FOR EMPLOYMENT**

In order for you to be considered for employment, this application must be filled out in its **ENTIRETY**. Resumes, though certainly welcome, should not be submitted in lieu of information requested below.

**GENERAL**

PLEASE PRINT

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security No: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                     First                    Middle                    Last

Email (non-school email): \_\_\_\_\_

Present Address: \_\_\_\_\_  
   Street  City  State  Zip

Emergency Contact

Address: \_\_\_\_\_  
   Street  City  State  Zip

Age Birth Date Day Phone: ( )  
 If Under 21: \_\_\_\_\_ If Under 21: \_\_\_\_\_ Evening Phone: ( )  
   Month Day Year

(SPECIFIC POSITION MUST BE LISTED FOR THIS APPLICATION TO BE CONSIDERED.) For what position are you applying?

Server    Host    Bartender    Busser    Expected Starting Hourly Rate \_\_\_\_\_  
Line Cook    Production    Dishwasher    Expected Weekly Earnings \_\_\_\_\_

Who referred you to Backyard Bistro? \_\_\_\_\_ Date available for employment \_\_\_\_\_

**WORK SCHEDULE AVAILABILITY**

What shift/hours are you available to work? Please list hours in each AM/PM box).

SHIFT	MON	TUES	WED	THURS	FRI	SAT	SUN
AM	to	To	to	to	To	to	to
PM	to	To	to	to	To	to	to

Are you willing to work a split shift? yes no    Are you willing to stay late in an emergency? yes no  
 Are you willing to work holidays/weekends? yes no    How many hours per week do you expect to work? \_\_\_\_\_

**EDUCATION**

Type of School	Name of School	Location of School	Courses Majored In	Last Year Completed		
High School				9 10 11 12	Diploma <input type="checkbox"/> yes <input type="checkbox"/> no	Grade Avg.
College/Other				1 2 3 4	Degree <input type="checkbox"/> yes <input type="checkbox"/> no	Grade Avg.

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**FORMER EMPLOYERS** (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT).

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DATE MONTH & YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

Which of these jobs did you like best?

What did you like most about this job?

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**REFERENCES** (GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOUU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR).

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	NAME	ADDRESS	BUSINESS
1			
2			
3			

I certify that all of the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, at any time, at either my or the company's option.

Date \_\_\_\_\_

Signature \_\_\_\_\_