

MO MO'S BBQ AND GRILL EMPLOYMENT APPLICATION

How were you referred to us?			Date of Interview: (MM/DD/YYYY)		
APPLICANT INFORMATION					
Last Name		First	M.I.	Date	
Street Address			Apartment/Unit #		
City		State	ZIP		
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
If you are under 18 years of age, can you provide a work permit? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, Please explain:					
Position Applied for Host <input type="checkbox"/> Server <input type="checkbox"/> Bartender <input type="checkbox"/> Server Assistant/Busser <input type="checkbox"/> Utility/Dish Machine Operator <input type="checkbox"/>					
Type of employment desired Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/>					
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?					
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain					

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

MO MO'S BBQ AND GRILL EMPLOYMENT APPLICATION

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS

DISCLAIMER AND SIGNATURE		
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">Signature</td> <td style="width: 40%; border: none;">Date</td> </tr> </table>	Signature	Date
Signature	Date	