

× NINA'S × BRUNCH

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer.

Date: ___ / ___ / ___

Name: _____
 Last First Middle

Address: _____
 Street Address City State Zip Code

Telephone Number: (____) ____ - ____

Do you have a legal right to work in the United States? Yes No

Position Desired: _____

Date you can start: ___ / ___ / ___

Please state reasons why you would be a good employee in the desired position:

Some jobs require that you are able to lift 50 pounds; can you lift 50 pounds?

Yes No If not, please explain: _____

Do you have objections to working:

Weekends? Yes No

Holidays? Yes No

Overtime? Yes No

Do you have dependable transportation to work? Yes No

Have you ever been disciplined or fired from a job? Yes No

If yes, please explain: _____

What grade have you completed in school? _____

CURRENT AND FORMER EMPLOYEES

(List most recent employer first.)

1.

Name of Company Position

Address of Company City, State Zip Code

Phone Number of Company ___/___/___ to ___/___/___
Dates of Employment

If no longer employed here, what is your reason for leaving?

Wage: \$_____ May we check with this employer? Yes No

Immediate Supervisor _____

2.

Name of Company Position

Address of Company City, State Zip Code

Phone Number of Company ___/___/___ to ___/___/___
Dates of Employment

If no longer employed here, what is your reason for leaving?

Wage: \$_____ May we check with this employer? Yes No

Immediate Supervisor _____

3.

Name of Company Position

3.

Address of Company City, State Zip Code

Phone Number of Company Dates of Employment

If no longer employed here, what is your reason for leaving?

Wage: \$_____ May we check with this employer? Yes No

Immediate Supervisor _____

PERSONAL REFERENCES

Give the names of two people, not related to you, whom you have known for at least one year, and whom we may call for a personal reference.

1. _____
Name (First, Last) Phone Number Years Acquainted

What is your relationship to this reference? _____

2. _____
Name (First, Last) Phone Number Years Acquainted

What is your relationship to this reference? _____

UNDERSTANDING

I authorize investigation of all statements contained in this application form, if I am considered for employment. I also understand that misrepresentation or omission of the facts called for herein or receipt of unsatisfactory references will be sufficient cause for dismissal from the company's service. If any of the facts called for herein change during the course of employment, this may be sufficient cause for reassignment or dismissal from the company's service. I further understand that this policy cannot be changed except in writing.

I understand that my employment can be terminated at any time, with or without cause, and with or without notice, at the option of either the company or myself.

Proof of right to work and identity will be required if selected for hire.

Applicant's Signature Date

Submit Application