

EVENTS by Saker

Sports Bar and Grill

Position(s) applying for _____ Date _____

Name _____
(First) (M.I.) (Last)

Address _____
(House/Apart. #) (St.) (NE,NW,SE,SW) (Area Code) (City) (State)

Telephone # _____ Cell # _____

Are you legally eligible for employment in this country? _____

Available start date ____/____/____ Desired Salary Amount _____
(Month) (Day) (Year)

How many hours are you available to work per week? _____

Availability

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
From							
To							

Are you at least 16 years old? _____

Date of Birth _____

Education

	Years Attended	School(s)	Graduation Year
Grade School			
High School			
College			
Other			

Employment History- Most Recent First

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Employer _____ Supervisor _____

Address _____ Telephone # _____

Date Started ____/____/____ Date Ended ____/____/____
(Month) (Year) (Month) (Year)

Reason for Leaving _____

Summarize type of work performed and responsibilities _____

Employer _____ Supervisor _____

Address _____ Telephone # _____

Date Started ____/____/____ Date Ended ____/____/____
(Month) (Year) (Month) (Year)

Reason for Leaving _____

Summarize type of work performed and responsibilities _____

Employer _____ Supervisor _____

Address _____ Telephone # _____

Date Started ____/____/____ Date Ended ____/____/____
(Month) (Year) (Month) (Year)

Reason for Leaving _____

Summarize type of work performed and responsibilities _____

Emergency Information

Emergency Contact's Full Name _____

Immediate Number _____

Relationship _____

Applicant's Signature _____ Date _____