



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE: _____

| | | | |
|---|------|--------------|----------|
| NAME (LAST NAME FIRST) | | PHONE NUMBER | |
| PRESENT ADDRESS | CITY | STATE | ZIP CODE |
| Driver's License State: _____ Expiration: ____/____/____ DL Number: _____ | | | |

EMPLOYMENT DESIRED

| | | |
|---------------------------------------|--------------------|---|
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED? YES ___ NO ___ | | IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? YES ___ NO ___ |
| AVAILABILITY - DAYS OF THE WEEK _____ | | |

CERTIFICATIONS

Are you currently TABC certified? Yes ___ No ___ Do you have a Food Handler's certificate? Yes ___ No ___

EDUCATION HISTORY

| | | |
|---|----------------|-----------------|
| HIGH SCHOOL | YEARS ATTENDED | DEGREE RECEIVED |
| COLLEGE, TRADE OR BUSINESS SCHOOL _____ | | |

GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING/SKILLS _____

FORMER EMPLOYERS

LIST LAST FOUR EMPLOYERS STARTING WITH THE LAST ONE FIRST

| <u>DATES OF EMPLOYMENT</u> | <u>NAME AND PHONE# OF EMPLOYER</u> | <u>SALARY</u> | <u>POSITION</u> | <u>REASON FOR LEAVING</u> |
|----------------------------|------------------------------------|---------------|-----------------|---------------------------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |

REFERENCES **Must be at least TWO Professional/Work references.**

| <u>NAME OF REFERENCE</u> | <u>RELATION</u> | <u>OCCUPATION</u> | <u>YRS KNOWN</u> | <u>PHONE</u> |
|--------------------------|-----------------|-------------------|------------------|--------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |