

Application for Employment

Ande Charles Slider Bistro (ACSB) is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Ande Charles Slider Bistro depends solely on your qualifications.

Last Name	First	М	N	ickname		Today's Date			
Street Address						Home Phone			
City, State, Zip							Cell Phone		
Have you ever applied for employment with ACSB?							Social Security Number		
☐ Yes ☐ No If Yes, Month/Year: Location:									
Desired Positio	n		Desired Pay		Location Preference				
Are you legally eligible for employment in the United States?							Are you available to work holidays?		
☐ Yes ☐ NO							es 🗆 No		
Have you ever been convicted of a felony? ☐ Yes ☐ No If Yes, explain:							Available start date?		
Do you have other special training or skills (e.g. language)? Explain.						Are you 18 or older? ☐ Yes ☐ No			
How did you hear about ACSB?									
Hours Available									
_	Monday	Tuesday	Wednesday	Thursday	Friday		Saturday	Sunday	
From:									
То:									
				f 61 1	" "		5.1		
School	Nan	ne and Location	n Cou	irse of Study	# of Y Comp		_	Graduate?	
High School							☐ Ye	es 🗆 No	
College							☐ Yes ☐ No		
Other Educatio	n						□ Ye	es 🗆 No	

Employment History

Please give accurate, complete, full-time and part-time record. Start with present or most recent employer. Include military experience if applicable.

Company Name and Addre		Phone					
Job Title	Supervisor Name	Employed (Month and Year) From: To:					
Describe Your Work		From: To: Pay Rate					
Describe rour work		End					
May we Contact This Employer? If no	t, why?	Reason for Leaving					
☐ Yes ☐ No							
What did you Like About This job?							
Company Name and Addre	SS		Phone				
2							
Job Title	Supervisor Name	Employed (Month and Year)					
		From: To:					
Describe Your Work		Pay Rate End					
May we Contact This Employer? If no	t, why?	Reason for Leaving					
☐ Yes ☐ No							
What did you Like About This job?							
Company Name and Addre	SS		Phone				
3							
Job Title	Supervisor Name	Emplo	yed (Month and Year)				
		From:					
Describe Your Work	Pay Ra	/ Rate End					
May we Contact This Employer? If no	Reaso	ason for Leaving					
☐ Yes ☐ No							
What did you Like About This job?							

I certify that information contained in this application is true and complete to the best of my knowledge. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above. I acknowledge that if I become employed, I will be free to terminate my employment at any time for any reason and Ande Charles Slider Bistro retains the same rights.

Signature Date