

EMPLOYMENT APPLICATION

(CIRCLE ONE)

DATE: _____

POSITION APPLIED FOR: SERVER/

KITCHEN STAFF

DELIVERY DRIVER

NAME	
ADDRESS	
PHONE	
EMAIL	
DATE OF BIRTH	
LAST 4 OF SSN	

PLEASE CHECK THE DAYS/TIMES YOU ARE **AVAILABLE TO WORK** (NOT WHAT YOU "PREFER" TO WORK)

**These are the only shift times for these positions. Scheduling is based on several factors. Not all shifts are always available.*

SERVER/DELIVERY DRIVER

6AM-3PM 8AM-5PM 3:45PM-2AM

MON			
TUES			
WED			
THU			
FRI			
SAT			
SUN			

KITCHEN

6AM-3PM 11AM-9PM 4PM-2AM

MON			
TUES			
WED			
THU			
FRI			
SAT			
SUN			

DO YOU HAVE A VALID DRIVER'S LICENSE? (circle one)

YES

NO

EMPLOYMENT HISTORY

CURRENT OR MOST RECENT EMPLOYER:

BUSINESS NAME	
ADDRESS	
YOUR POSITION	
DATES EMPLOYED	

OTHER PREVIOUS EMPLOYER:

BUSINESS NAME	
ADDRESS	
YOUR POSITION	

DATES EMPLOYED

Management Only:

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