Oy's Thai Cuisine

Application for Employment

Position you are applying for: _____ Date Available for Work: _____

Personal Information

_____ _____ _____

Last Name First Name Middle

_____ _____ _____ __ _____

Street Address City State Zip

Home Phone: _____ Cell Phone: _____ Email address: _____

Social Security Number: _____

Do you have a valid work permit? _____ Have you ever been convicted of a felony? _____

Availability	Mon	Tue	Wed	Thu	Fri	Sat
Times (e.g. 9:00 AM – 5:00 PM)						

Education				
School Name	Location	Years Attended	Degree Received	Major

Employment (begin with most recent employer)

Employer 1

Employer Name: _____ Dates Employed: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Work Phone: _____ Beg Pay Rate: _____ End Pay Rate: _____

Position: _____

Duties Performed: _____

Supervisor's Name: _____ Title: _____ Ph Number: _____

Reason for Leaving: _____

May we contact your previous supervisor? _____

Employer 2

Employer Name: _____ Dates Employed: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Work Phone: _____ Beg Pay Rate: _____ End Pay Rate: _____

Position: _____

Duties Performed: _____

Supervisor's Name: _____ Title: _____ Ph Number: _____

Reason for Leaving: _____

May we contact your previous supervisor? _____

Employer 3

Employer Name: _____ Dates Employed: _____

Work Phone: _____ Beg Pay Rate: _____ End Pay Rate: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Position: _____

Duties Performed: _____

Supervisor's Name: _____ Title: _____ Ph Number: _____

Reason for Leaving: _____

May we contact your previous supervisor? _____

References			
Name	Title	Company	Phone#

Acknowlegement & Authorization

___ I certify that all answers given herein are true and complete to the best of my knowledge.

___ I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

___ In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge

_____ _____

Signature of applicant Date