APPLICATION FOR EMPLOYMENT AT

Please save this application to your local computer and fill out completely. Save the form after it has been completed and email the application to info@grooveburgers.com



An Equal Opportunity Employer. Reasonable accommodation will be provided as required by law.

Last Name	First Name	e	Middle Ini	itial	Social	ial Security Number		
Street Address	City/St	tate	Zip Code	Phone Nu	mber	Email		
If hired, can you provide evidentlegal eligibility to work in the U		Any offer of employment is conditioned upon completing form I-9 and providing the appropriate documents for identity and work authorization.						
Position Desi	Wa	Wage/Salary Desired: Full Tir			Гime?	Part Time?		
Date you can begin work?	Are you 18 years of a	ou 18 years of age or older? If under 18 years of age, you will be required to submit a birth certificate or work certificate as required by state or federal law.						
Name of high school a		City/State			Graduate?	GED?		
Name of college or techn	City/State				Degree?	Major:		
Are you presently enrolled in school? If yes, give name & address of school and expected degree date: No								
List any job-related skills or accomplishments, including military service:								
- YOUR AVAILABILITY FOR WORK -								
Monday From: To:	Tuesday Wedn	nesday	Thursday	Friday	S	Saturday	Sunday	
Ootal hours per week you Do you have any special requests or needs for a work schedule? re available to work:						le?		

- REFERENCES -

- Provide Three References Who Are Not Former Employers Who We May Contact -

Name and Occupation		How do you know them, and for how	long? Phone Number							
- YOUR EMPLOYMENT HISTORY -										
List names of employers with present or last employer listed first.										
May we contact current en	nployers before you a	re offered a position?								
Name of Employ	ver:	Job Title:	Dates of Employment: From: To:							
Address:		City, State, Zip Code	Duties:							
Supervisor:	Telephone:	Starting pay: Ending pay:								
Name of Employ	ver:	Job Title:	Dates of Employment: From: To:							
Address:		City, State, Zip Code	Duties:							
Supervisor:	Telephone:	Reason for Leaving:	Starting pay: Ending pay:							
Name of Employ	ver:	Job Title:	Dates of Employment: From: To:							
Address:		City, State, Zip Code	Duties:							
Supervisor:	Telephone:	Reason for Leaving:	Starting pay: Ending pay:							