

Employment Application

In accordance with federal and state equal employment opportunity laws, it is this company's intention to consider all applicants without regard to race, color, religion, sex, national origin, age, marital status, disability, the presence of non-job related medical conditions, or other protected classification.

Applicant Information	on				Hover	form fields fo	r instructions.	
What position are you applying for?					Date of application			
Name (first, middle, last)				SSN _		Phone		
Street address								
	ity State							
Are you authorized to work in the United States? OYes ONo								
Date of birth (if you are under 22 and applying for a position that requires you to serve alcohol)								
Availability								
Are you available for fu	ıll time work	⟨? ○Yes	○No F	Pay expecte	ed	per		
How many hours per week do you expect to work? Minimum Maximum								
If you are not available for full time work, indicate the shifts you are available.								
	_	-	•	Thursday —	Friday		Sunday	
Dinner				Ш	Ц	Ш	Ш	
Education								
High school attended					Did you gradu	ate? OYes	s O No	
College attended					Did you gradu	iate? OYes	s ONo	
Major	fajor Minor					Number of years completed		
Skills & Qualification	าร							
List any special abilities or knowledge you have that are related to the job for which you are applying								
In addition to work experience, what other experiences, skills, or abilities should be considered?								

Employment History		(Start with the c	urrent or most recent.)
1. Company name		From	To
Job Title	Supervisor		Phone
Reason for leaving			
2. Company name		From	To
Job Title	Supervisor		Phone
Reason for leaving			
3. Company name		From	To
Job Title	Supervisor		Phone
Reason for leaving			
Referral Source			
How did you hear about this job? Do you have a relative working for Glory Da			 'es
If yes, which location?	What is his/her position?		
References			
1. Name	Phone	Years l	known
2. Name	Phone	Years k	known
3. Name	Phone	Years k	known
General Information			
Emergency contact name		Phone	
Street address			
City State			
Will you abide by the safety rules of this co	mpany? () Yes () No		

Genero	ıl Information (cont'd)		
	u ever been convicted, entered a p I for any crime except minor traffic		lication withheld or prosecution
	ons will not necessarily exclude you red for job placement.	ı from employment, but date a	and type of conviction may be
	swered Yes to the previous questicion was taken.	on, explain in full, indicating da	ite, charge, place, under what name, and
Date	Nature of conviction	Location	Disposition of offense
	Please read the	e following carefully and s	sign below.
reference application informat such informat such informat such information in	cion to the company, and release from the company, and release from the company in good faith, as allowed by the company in the company in the company in the company, I understand that I will be an as subsidiaries or affiliates (collectively Grill for any reason whatsoever, and additional background check the company in	terview. I authorize any person om liability and agree to hold holy applicable state and federal apany. Should I become involve employment by the company, I able state and federal laws) to employee at will and that my early. "Glory Days Grill'), may be Should Glory Days Grill employees should they become necess ms of my employment shall be which may be periodically amenative of Glory Days Grill, other to yee at will and that any such me this is only an application for e	rding information provided on this n(s) having knowledge to provide such narmless any person that furnishes laws. I will agree to a drug test, if ed in a claim for worker's I will allow the company to supply my an opposing party. If employed by employment with Glory Days Grill or exterminated at anytime by myself or by me, I also authorize Glory Days Grill sary at any point during my based on all provisions described in

Applicant signature and date