Instructions & Checklist Employment Application

[_] This package contains: (1) Instructions and Checklist for the Employment Application; (2) Employment Application.
[_] This application makes assertions regarding the company's practice of providing equal employment opportunities; review your company's policy to ensure its accuracy.
[_] The applicant should sign the employment application.
[_] If the applicant is hired, a copy of their employment application should be kept with their other employment records.
Laws vary from time to time and from state to state. These forms are not intended to be and are not a substitute for legal advice. Employers should consult with their attorneys before using this application to ensure that it complies with all laws.
[_] The purchase and use of these forms is subject to the "Disclaimers and Terms of Use" found at findlegalforms.com.

APPLICATION OF EMPLOYMENT

Michael's Divine Dining 117 B East First ST Port Angeles WA 98362 www.michaelsdining.com

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Note : Please type or print your answers. If you print, please do so in blue or black ink and write neatly. An illegible application may preclude you from consideration.					
POSITION APPLYING FOR:					
First Name	Middle Initial	I	_ast Name		
Current Address:					
Street and Apt. #	City	State	Zip Code		
Permanent Address (if different fi	rom above):				
Street and Apt. #	City	State	Zip Code		
Telephone:	E	-mail:			
I am an U.S. Citizen or otherw basis: ☐ Yes ☐ No If applicable, please list your v)				
Have you ever been convicted If you answered yes, please e	,	Yes [□ No		
Have you ever served in the User If yes, please provide the follow Branch of Service: I served from	wing information: Rank	at time of sepa	□ No ration:		

Last Name:	_ First Name:			Middle Initial:	
EMPLOYMENT HISTORY:					
Present or Most Recent Employer					
Employer:		Address	s:		
Your Position:		Salary:			
Duties:					
Dates of Employment:	to				
Supervisor:Name		Title		May we contact? □ Yes □ No	
Reasons for Leaving:					
Prior Employer					
Employer:		Address	s:		
Your Position:		Salary:			
Duties:					
Dates of Employment:	to				
Supervisor:Name		Title		_ May we contact? □ Yes □ No	
Reasons for Leaving:					
Prior Employer					
Employer:		_	Address:		
Your Position:		_	Salary:		
Duties:					
Dates of Employment:	to				
Supervisor:			N	flay we contact? □ Yes □ No	
Name		Title			
Reason for leaving:					

Last Name:	First Name:	Middle Initial:
EDUCATION		
High School		
Name and Address		
	□ No Attended from to	
If you did not graduate, did y	ou receive your GED? 🛘 Yes 🗎 No	
Special honors or awards:		
Technical or Vocational Scho	pol	
Name and Address		
Did you graduate? ☐ Yes [☐ No Attended from	to
Degree or Certification:	Specialty:	
Special honors or awards:		
College or University		
Name and Address		
Did you graduate? ☐ Yes [□ No Attended from	to
Degree:	Major:	
Special honors or awards:		
College or University		
Name and Address		
Did you graduate? ☐ Yes [☐ No Attended from	to
Degree:	Major:	
Special honors or awards:		

Last Name:	_ First Name:	Middle Initial:
POSITION INFORMATION:		
Position Specifications		
Position Applying For:		
How did you hear about this job?		
What hours are you willing to work?		
Would you be able to work weekends?	□ Yes	□ No
Are you willing to travel for the job?	□ Yes	□ No
When would you be able to start?		
Do you have a current health permit?: card?:		Do you have a current alcohol serving
Skills		
Please describe any skills you have in	the following are	eas:
Computer:		
Languages Spoken (other than English	ı):	
Other:		
Please attach a brief e	• •	•
describing why you w		
_	• •	te piece of paper for the
essay-typed essays a	ie preieri	eu.
to the best of my knowledge. If I am eapplication shall be considered sufficito investigate any aspect of my prior ounderstand that if I am hired, employr	mployed, I unde ent cause for m educational and nent with this co	orth in this application are true and complete erstand that any false statements on this by dismissal. I hereby authorize this company I employment history. Furthermore I ompany is "at will," which means that either any reason not prohibited by state or federal
Signature:		Date