

EMPLOYMENT APPLICATION

DATE _____

EQUAL OPPORTUNITY EMPLOYER

VARIOUS FEDERAL, STATE AND LOCAL LAWS PROHIBIT DISCRIMINATION BASED ON RACE, COLOR, SEX, AGE, RELIGION, NATIONAL ORIGIN, ANCESTRY, DISABILITY, OR MARITAL STATUS. RED BEAN'S BAYOU GRILL IS AN EQUAL OPPORTUNITY EMPLOYER AND YOUR RESPONSE TO ANY QUESTION WILL NOT BE USED AS BASIS FOR DISCRIMINATION, BUT WILL BE JUDGED ON ITS RELEVANCE TO THE POSITION YOU ARE SEEKING.

NAME _____ SSN _____
Last First MI

ADDRESS _____
Street City State Zip

PHONE _____ OTHER _____

REFERRED BY _____

IF HIRED, CAN YOU PROVIDE PROOF THAT YOU ARE ELIGIBLE TO WORK IN THE UNITED STATES? YES ___ NO ___

IF REQUIRED, CAN YOU PROVIDE US A COPY OF YOUR KANSAS FOOD HANDLERS PERMIT? YES ___ NO ___

EDUCATION: (LIST NAME & LOCATION)

HIGH SCHOOL _____ GRADUATE? _____

COLLEGE _____ DEGREE? _____

OTHER _____ DEGREE? _____

OTHER _____ DEGREE? _____

STATE LIQUOR LAW

PLEASE FILL OUT THE FOLLOWING IF YOU ARE APPLYING FOR A POSITION INVOLVING THE SERVING OF ALCOHOL OR THE HANDLING OF LIQUOR MONEY.

DO YOU HAVE ANY VIOLATIONS INVOLVING LIQUOR OR BEER? Y N

ARE YOU UNDER THE AGE OF 21? Y N

IF YES, PLEASE LIST YOUR BIRTHDAY MONTH ___ DAY ___ YEAR ___

DO YOU KNOW OF ANY REASON THAT WOULD MAKE IT DIFFICULT FOR THE COMPANY TO OBTAIN A SURETY BOND ENSURING YOUR HONESTY? Y N

IF YES, PLEASE EXPLAIN _____

TYPE OF POSITION DESIRED _____ AND/OR _____

TYPE OF EMPLOYMENT FULL TIME ___ PART TIME ___ PERMANENT ___ TEMPORARY ___

COMPENSATION DESIRED _____ DATE AVAILABLE _____

ARE YOU WILLING TO WORK OVERTIME IF REQUIRED? Y N

DO YOU HAVE ANY LIMITATIONS OR SPECIAL CIRCUMSTANCES THE COMPANY SHOULD BE AWARE OF?

IF YES, PLEASE EXPLAIN _____

PREFERRED SCHEDULE MON TUES WED THURS FRI SAT SUN

DAY SHIFT _____

NIGHT SHIFT _____

WORK HISTORY

LAST/PRESENT EMPLOYER _____ ADDRESS _____ PHONE _____

FROM _____ TO _____ PAY RATE _____
JOB TITLE _____ DUTIES _____
REASON FOR LEAVING _____ SUPERVISOR _____

PREVIOUS EMPLOYER _____ ADDRESS _____ PHONE _____

FROM _____ TO _____ PAY RATE _____
JOB TITLE _____ DUTIES _____
REASON FOR LEAVING _____ SUPERVISOR _____

PREVIOUS EMPLOYER _____ ADDRESS _____ PHONE _____

FROM _____ TO _____ PAY RATE _____
JOB TITLE _____ DUTIES _____
REASON FOR LEAVING _____ SUPERVISOR _____

REFERENCES

LIST TWO REFERENCES WHO ARE NOT RELATIVES OR FORMER EMPLOYERS

NAME	ADDRESS	PHONE	OCCUPATION	YRS KNOWN
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND THAT EMPLOYMENT AT THE COMPANY IS "AT WILL", WHICH MEANS THAT EITHER I OR THE COMPANY CAN TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, WITH OR WITHOUT PRIOR NOTICE, AND FOR ANY REASON NOT PROHIBITED BY THE STATUTE."

SIGNATURE _____ DATE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____
POSITION _____
COMMENTS _____

HIRE DATE _____ RATE _____

HIRED BY _____