



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer
(Valid for 90 days)

Today's Date _____

Last Name (Please Print) _____ First _____ Social Security Number _____ () _____
 Home Telephone Number _____
 Present Address: Street _____ City/State _____ Zip Code _____ () _____
 Cellular or Other Contact Telephone Number _____
 Do you have reliable transportation to and from work during our hours of operation?
 Yes No Are you applying for a full-time or part-time position?
 Full-time Part-time If hired, can you submit documents to prove your legal right to work in the U.S.?
 Yes No
 Position Applying For: Are you of legal age to serve alcoholic beverages?
 Server Bartender Host/Hostess Kitchen Prep Cook Yes No

1. What is the minimum amount you need to earn? \$ _____/week \$ _____/month

2. How many jobs have you had in the past year? _____ Past two years? _____

3. What were the circumstances for leaving each job?

4. Why do you want to work for Beef 'O' Brady's?

5. Have you been convicted of a felony that has not been annulled, expunged or sealed by the court? Yes No
(Conviction will not necessarily disqualify an applicant from employment, but will be considered in the context of the entire application and position applied for.)

6. Please indicate your availability by placing a check mark in the boxes for which you are available to work.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM

7. When would you be available to start? _____

8. Please explain why you would make a good Beef 'O' Brady's employee?

9. List any job-related skill, qualification or education that would support your application.

10. Have you ever been employed by this or any Beef 'O' Brady's? Yes No If Yes, which location: _____

EMPLOYMENT EXPERIENCE

Employer	Dates Employed (From/To)	Immediate Supervisor
Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
Reason for Leaving		
May we contact this employer? If NO, Please explain. _____		

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Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
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May we contact this employer? If NO, please explain. _____		

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Work Performed		
Reason for Leaving		
May we contact this employer? If NO, Please explain. _____		

List below any other information or remarks that you wish to have considered as a part of your application for employment:

NOTICE TO APPLICANTS: This employer complies with the Americans with Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job-related functions. If you are given a conditional offer of employment, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination. If required, all entering employees in the same job category will be subject to the same medical questionnaire and/or examination and all information will be kept confidential and in separate files.

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give the Employer permission to contact schools, previous employers, references, and others, and hereby release the Employer from any liability as a result of such contact. I understand that misrepresentations, omissions of facts or incomplete information requested in this application may remove me from further consideration for employment. In addition, if employed, any misrepresentations or omissions of facts called for in this application will be cause for dismissal at any time without any previous notice.

Applicants accepted for employment should clearly understand that while we make every effort to provide steady, continuous work, we have no employment contracts, and we cannot guarantee the permanence of any position. Job tenure can be affected by many factors including business/economic conditions, changes in laws or Employer policies, conformity to our work rules, job performance, etc. And of course, employees may elect to leave on their own accord to seek other jobs.

I understand that my employment with the Employer is for no specific term and may be terminated by me or the Employer with or without notice or cause at any time. I further understand that no oral promise, Employer policy, custom, business practice or other procedure (including the Employer's Personnel Handbook or any personnel manuals) constitutes an employment contract or modification of the at-will employment relationship between me and the Employer.

This application will remain active for ninety (90) days. Any applicant wishing to be considered for employment beyond ninety (90) days should reapply.

Signature _____ Date _____

This Employer is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, age, sex, religion, national origin, disability or marital status. We assure you that your opportunity for employment with this Employer depends solely upon your qualifications.