



Employment Application

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status. This is a drug free work place.

PLEASE PRINT CLEARLY

APPLICANT INFORMATION

Position(s) applied for _____ Date _____
Name _____ Telephone No. _____
Cell Phone No. _____
Address _____
City/State/Zip _____ Do you have a resume? _____

Are you legally authorized to work in the United States? Yes No

(Proof of US citizenship or immigration status is required if hired)

Are you under 16 years of age? Yes No

Are you at least 18 years old? Yes No

Have you been convicted of a crime? Yes No (Note: The existence of a criminal record does not constitute an automatic bar to employment.) _____

If hired, do you have reliable means for transportation to get to work? Yes No Describe _____

Are you a veteran? Yes No If yes, dates of service: From _____ To _____

List any special skills or training: _____

EMPLOYMENT INFORMATION

Are you seeking Full Time Part Time Temporary employment?

What hours and shift(s) would you prefer to work? _____

List times you are not available to work: _____

Are you willing to work overtime? Yes No (Weekends? Yes No) (Holidays? Yes No)

How many hours do you want to work? _____

Are you currently employed? Yes No If hired, when would you be able to start? _____

Have you ever worked for this organization before? Yes No If yes, name used: _____

List any friends or relatives employed by this company: _____

Have you ever been discharged or asked to resign from any position? Yes No If yes, please describe: _____

WORK HISTORY

Company _____ Phone (_____) _____
Address _____ City/State/Zip _____
Date of Employment: From _____ To _____ Salary: Beginning _____ Ending _____
Job Title _____ Supervisor Name/Title _____
Describe duties: _____
Specific reason for leaving: _____

Company _____ Phone (_____) _____
Address _____ City/State/Zip _____
Date of Employment: From _____ To _____ Salary: Beginning _____ Ending _____
Job Title _____ Supervisor Name/Title _____
Describe duties: _____
Specific reason for leaving: _____

Company _____ Phone (_____) _____
Address _____ City/State/Zip _____
Date of Employment: From _____ To _____ Salary: Beginning _____ Ending _____
Job Title _____ Supervisor Name/Title _____
Describe duties: _____
Specific reason for leaving: _____

For reference purposes: Have you worked for any of the above organization under a different name? If yes, give name & organization: _____

May we contact the employers listed above? Yes No If not, list the employers you do not wish us to contact and why: _____

How long do you intend to work for us if you are hired? _____

Why do you want to work for us? _____

What are you strengths? _____

What makes you think you would do a good job working for us? _____

I certify the above information to be true to the best of my knowledge. I understand that any false statement made on this application will be cause for immediate dismissal.

 **SIGNATURE OF APPLAICANT** _____

Please do not call in to check on your application! You need to come in after between 2:00 and 5:00 p.m. week days.



WE CARE ABOUT OUR EMPLOYEES, THEY ARE THE KEY TO OUR FUTURE!

Thank you Butter Burr's management!! Please visit us at www.butterburrsrestaurant.com