

APPLICATION FOR EMPLOYMENT AT **LT EVANS RESTAURANT**

EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

DATE _____

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.	
ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.	REFERRED BY		

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARAY DESIRED
ARE YOU EMPLOYEED NOW?	ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.A.?	

EDUCATION

NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS SCHOOL			

GENERAL INFORMATION

SPECIAL TRAINING	
SPECIAL SKILLS	
U.S. MILITARY SERVICE	RANK

FORMER EMPLOYERS (BEGIN WITH MOST RECENT EMPLOYER)

DATE, MONTH, YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES

NAME	PHONE	BUSINESS	YEARS KNOWN

AUTHORIZATION

"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."

DATE _____

SIGNATURE _____