

# TASTING STATION RESTAURANT GROUP

## APPLICATION FOR EMPLOYMENT

*Pre-Employment Questionnaire ~ An Equal Opportunity Employer*

### INSTRUCTIONS

Date: \_\_\_\_\_

- ◆ Our application form is used to evaluate qualifications for determining the essential job functions for employment.
- ◆ Complete all sections of this application form. False or misleading information during the interview and/or on this application form may be reasons for termination.
- ◆ Please notify the person that gave you the application form if you need any assistance in filling out the application form or have questions regarding the employment process. Every effort will be made to accommodate your needs in a reasonable amount of time.
- ◆ Qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or disabilities.

### PERSONAL INFORMATION

**PLEASE READ STATEMENT BELOW BEFORE YOU BEGIN TO APPLY:**  
*All positions require availability for at least one shift Friday or Saturday and a minimum of three shifts per week. If you do not currently have these shifts available you will not be considered for employment. Please mark all time slots you are available throughout the entire week. (OCCASIONAL REQUESTS OFF WILL BE CONSIDERED)*

Name \_\_\_\_\_ Soc. Sec. Number \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_ Apt # \_\_\_\_\_  
STREET CITY STATE ZIP

Home Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_  
WRITE ADDRESS LEGIBLY ~ INCLUDE ONLY IF FREQUENTLY USED

### EMPLOYMENT AVAILABILITY

**"X" All Desired Positions:**

- FOOD SERVER       HOST       BARTENDER       CATERING  
 KITCHEN       DISHWASHER       BUS PERSON       OTHER \_\_\_\_\_

**Please mark an "X" in the time slots you ARE available to work:**

**Date You Can Start:** \_\_\_\_\_

	6-8 am	8-10 am	10-11 a.m.	11-12 a.m.	12-1 p.m.	1-2 p.m.	2-3 p.m.	3-4 p.m.	4-5 p.m.	5-6 p.m.	6-11 p.m.
Mon											
Tues											
Wed											
Thur											
Fri											
Sat											
Sun											

Indicate your preferences:  FULL-TIME       PART-TIME \_\_\_\_\_      Pay Rate Desired: \_\_\_\_\_ per \_\_\_\_\_  
# of hours desired per week

### EDUCATION

HIGH SCHOOL: YES    NO	City _____	State _____	Have you recieved your Diploma? YES    NO	GED? YES    NO
COLLEGE:	City _____	State _____	Have you recieved your Diploma? YES    NO	
COLLEGE:	City _____	State _____	Have you recieved your Diploma? YES    NO	
Trade/ Business Or Correspondence School	City _____	State _____	Have you recieved your Diploma? YES    NO	

Can you perform the requirements of the job with or without reasonable accommodation?  
 Have you been convicted of a felony? ~ If yes, please describe:

YES  NO  
 YES  NO

**REFERENCES** Include only individuals familiar with your work ability. Exclude Relatives.

NAME	ADDRESS	PHONE	YEARS KNOWN	RELATIONSHIP

**FORMER EMPLOYERS**

~List below last three employers, starting with the last/current one first~

Are You Currently Working?  YES  NO ~ If YES, may we contact current employer?  YES  NO

Company Name	City	State	Phone
Date Employed From: To:	Salary \$	per hr / wk / mth / yr	Your Job Title Name of Supervisor
What you enjoyed most about the job:			
What you liked least about the job:			
Duties:			
Reason For Leaving:			

Company Name	City	State	Phone
Date Employed From: To:	Salary \$	per hr / wk / mth / yr	Your Job Title Name of Supervisor
What you enjoyed most about the job:			
What you liked least about the job:			
Duties:			
Reason For Leaving:			

Company Name	City	State	Phone
Date Employed From: To:	Salary \$	per hr / wk / mth / yr	Your Job Title Name of Supervisor
What you enjoyed most about the job:			
What you liked least about the job:			
Duties:			

Reason For Leaving:

**RELEASE AND AUTHORIZATION**

~I certify that I have read and understand the applicant note on page one of this form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment.  
 ~I authorize the company and/or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to criminal history and motor vehicle driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information.  
 ~I also understand that the use of illegal drugs is prohibited during my employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

Signature

Date