



William Jeffrey's Tavern Application for Employment



Name _____ SSN _____ DOB _____

Address _____

Phone _____ Email _____

What position are you applying for? _____

Previous Experience: (please list most recent first)

Employer #1:	Job Title:
Dates Employed:	Reason for Leaving:
Phone :	May We Contact? Yes No
Responsibilities:	
Employer #2:	Job Title:
Dates Employed:	Reason for Leaving:
Phone :	May We Contact? Yes No
Responsibilities:	
Employer #3:	Job Title:
Dates Employed:	Reason for Leaving:
Phone :	May We Contact? Yes No
Responsibilities:	

Personal/Professional References:

Name	Phone	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Background:

Have you ever been convicted of a felony? Yes No

Have you ever been fired/terminated from any employment? Yes No

If yes to either, please explain: _____

Availability: check all available time slots

	MON	TUES	WED	THURS	FRI	SAT	SUN
AM							
PM							

Are you seeking full time or part time work? _____ How many shifts per week? _____

When are you available to start? _____

My signature below indicates that all of the information on this application is true. I understand that falsifying any information on this application could prevent my hire or be grounds for termination of my employment.

Signature _____

Date _____