

		EMPLOYMEN	IT APPLICA	ATION	Today's date:
PLEASE PRINT					
First Name	M.I.	Last Name		Prefer	red Name/Nickname
Street Address	Apartment #	City	Sta	te Zip C	Code
Home Phone	Cell Phone	Alternate/Work I	Phone	E-Mail Address	
POSITION SOUGH	IT AND AVAILABILITY				
	Server Bartender _	Russer	Kitchen	Other (please speci	fv)
Are you interested	l in: Full-time	Part-time		Temporary	'y/
Dave and Hours A	vailable: LIST HOURS O	F AVAILABILITY FOL	P EACH DAY	Temporary	
Monday Tu	uesday Wednes	day Thure	day E	riday Saturda	ay Sunday
When are you able	to start work? (Data)	uay muis	uayı	iluay Saluiud	dy Sullday
Desired Boy:	rly Doy	ual Day	How did	You hoor shout the n	ocition?
DI EASE CHECK V	e to start work? (Date) _ rly Pay Annu 'ES OR NO TO THE FO	LOWING	now did ;	you near about the p	osition?
Are you sutherized	d to work in the United	Ctotoo?	Na		
Are you authorized	d to work in the United	States? Yes_	INO		ce with these laws, City Social will verify the
					of the applicant's identity and employment
authorization, and it will be	necessary for you to submit such	documents as are require	d by law to verify yo	ur identification and employme	ent authorization.
Are you under 18 y	years of age? Yes	_ No If yes, o	can you furnish	n a work permit? Ye	s No
Are you capable of perf	orming the essential function	s of the job for which y	ou are applying	with or without a reasonab	le accommodation? Yes No
PLEASE LI	ST YOUR WORK EXPE	RIENCE BELOW (MOST RECEN	NT JOB FIRST)	
	COMPANY NAME			YOUR POSITION and TITL	E
FROM	NO. & STREET			SUPERVISOR'S NAME, TIT	TLE and POSITION
	CITY ST	ATE ZIP	CODE	SUPERVISOR'S TELEPHO	NE NUMBER
	TYPE OF BUSINESS	STA	RTING PAY	FINAL PAY \$	
ТО	TELEBLIONE NUMBER		MINATION	•	
10	TELEPHONE NUMBER		DLUNTARY	REASON	
	()	l □ IN	VOLUNTARY		
	BRIEFLY DESCRIBE YOU	JR <u>MAJOR DUTIES</u> AN	D <u>REASON(S) FO</u>	R TERMINATION	
	COMPANY NAME			YOUR POSITION and TITL	E
FROM	NO. & STREET			SUPERVISOR'S NAME, TIT	TLE and POSITION
	CITY ST	ATE ZIP	CODE	SUPERVISOR'S TELEPHO	NE NUMBER
	TYPE OF BUSINESS	STA	RTING PAY	FINAL PAY	
ТО	TELEPHONE NUMBER	TERI	MINATION	REASON	
		□ V(DLUNTARY VOLUNTARY		
	BRIEFLY DESCRIBE YOU	BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION			
PLEASE LI	ST YOUR EDUCATION:	i I			
	ORESS OF SCHOOL	MA.I	OR .	GRADUATE?	DEGREE OR DIPLOMA

HIGH SCHOOL OR PREP

COLLEGE

PLEASE LIST YOUR PROFESSIONAL LICENSES OR CERTIFICATIONS (BASSET, FOOD SANITATION, etc.):

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
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PLEASE TELL US A LITTLE ABOUT YOURSELF:

Why are you interested in working at City Social?	Why are you interested in the position you are applying for in particular?	What do you feel are the most important characteristics for the job you are applying for?
RESPONSE:	RESPONSE:	RESPONSE:

REFERENCES: Please list three professional references

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

IN THE LAST SEVEN (7) YEARS, HAVE YOU BEEN CONVICTED OF OR HAVE YOU PLEADED GUILTY TO ANY FELONY OR MISDEMEANOR*? (Please exclude minor traffic offenses and convictions which have been sealed, impounded, erased, expunged, annulled or nolled). If yes, please describe:

PLEASE READ BEFORE SIGNING APPLICATION

City Social is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, City Social complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. City Social also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws. I have submitted the attached form to City Social ("Company") for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the Company to further process my application. My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ. I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking. I also agree that a copy of this form is valid like the signed original. I certify that all of my personal information on this form is true and correct and understand that dishonesty will disqualify me from consideration for employment with the Company, or if I am hired or already work for the Company, that my employment may be terminated. I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees. References: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Last Name _.	First _	Middle _	
SIGNED:_		DATE:	

^{*} PLEASE NOTE: OTHER FACTORS WILL BE TAKEN INTO ACCOUNT SUCH AS THE NATURE OF THE OFFENSE, THE TIME THAT HAS PASSED SINCE THE CONVICTION AND THE TYPE OF JOB BEING SOUGHT. FURTHER, THIS INFORMATION WILL BE USED ONLY FOR JOB-RELATED PURPOSES AND ONLY TO THE EXTENT PERMITTED BY APPLICABLE LAW.