

J. McCroskey's Pub and Grill

Application for Employment

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

Personal Information

Date: _____ Social Security Number _____

Name: _____ Date of Birth _____

Mailing
Address _____

Physical
Address _____

Phone Number _____ Driver License Number _____

Employment Desired

Position _____ Date you can start _____ Salary Desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Are you ServeSafe Certified? Yes _____ No _____ Date of Exam _____

Background Information

Please circle what best describes your education.

Some High School
Some College

High School Graduate
College Graduate

Please indicate what days you are available for work with a X.

Mon Lunch ___ Tues Lunch ___ Wed Lunch ___ Thurs Lunch ___ Fri Lunch ___ Sat Lunch ___ Sun Lunch ___
Mon Dinner ___ Tues Dinner ___ Wed Dinner ___ Thurs Dinner ___ Fri Dinner ___ Sat Dinner ___ Sun Dinner ___

Do you have any upcoming events that would prevent you from working? Yes ___ No ___

If yes, please list exact dates: _____

Former Employers List below your last three employers, starting with the last one first.

Date	Name and phone of Employer	Salary	Position	Reason For Leaving
Month/Year		Upon Leaving		

From
To

From
To

From
To

References List below three persons not related to, whom you have known at least one year.

<u>Name</u>	<u>Phone #</u>	<u>Position</u>	<u>Years Acquainted</u>
-------------	----------------	-----------------	-------------------------

1. _____

2. _____

3. _____

If you are hired by the company, you will be required to attest to you identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

Authorization

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. You will be responsible for obtaining your background check if you are hired as a bar or wait. A notarized endorsed copy from the local Clerk of Court will be honored. The Clerk of Court will administer a fee for this service. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands, or liabilities arising out or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law, I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company rules, policies, and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Date _____ Signature _____