

# Warbirds Café

## Application for Employment

Date Application Submitted: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
first MI last nickname

Local Address: \_\_\_\_\_  
po box/street city state zip

Permanent Address: \_\_\_\_\_  
po box/street city state zip

Phone Number: \_\_\_\_\_ Are you 18 years or older? YES NO  
circle one

Position applying for: \_\_\_\_\_

Are you available any day? \_\_\_\_\_ Any night? \_\_\_\_\_

Are you interested in Full-Time or Part-Time employment?  
circle one

Are you interested in Permanent or Seasonal employment?  
circle one

Date you can start: \_\_\_\_\_ Date you can work until: \_\_\_\_\_

Who or what motivated you to apply for employment at Warbirds Café? \_\_\_\_\_

Education: (You may attach a resume that details this)

High School \_\_\_\_\_ YES NO  
name location did you graduate? (circle one)

College \_\_\_\_\_ YES NO  
name location did you graduate? (circle one) area of study

Other (i.e. trade, correspondence, business or alternative schools)

\_\_\_\_\_ YES NO  
name location did you graduate? (circle one) area of study

\_\_\_\_\_ YES NO  
name location did you graduate? (circle one) area of study

Recent Work Experience: (You may attach a resume that details this)

name of company location job title dates of employment supervisor's name and phone number reason for leaving

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Special Skills or Interests: \_\_\_\_\_

References: (people not related to you)

name phone number business years acquainted

name phone number business years acquainted

name phone number business years acquainted

In case of emergency notify: \_\_\_\_\_  
name relationship address phone number

“I certify that all the information submitted by me on this application and in attached documents is true and complete, and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I grant permission to Warbirds Café LLC to contact any of the references or past supervisors I have identified in order to verify the information contained herein.

“In consideration of my employment, I agree to conform to the company’s rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the company’s option. I also understand that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company.”

signature of applicant date

Extra Credit:

In the space below, describe your favorite restaurant in the world and why it is so great.

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DO NOT WRITE BELOW THIS LINE

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

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Hired: \_\_\_\_\_ Position: \_\_\_\_\_

Salary/Wage: \_\_\_\_\_ Date Reporting to Work: \_\_\_\_\_