



GREAT DANE

PUB & BREWING

APPLICATION FOR EMPLOYMENT

NOTICE: Applicant should read the following information carefully before filling out any of the questions on this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statuses. Information requested on this application will not be used for any purpose prohibited by law.

PERSONAL INFORMATION

NAME: Last First MI SSN#

Street City ST Zip Phone

Are you 18 or older? Yes No if no, Date of Birth / / If under age 18, how many hours per week are you employed elsewhere? hours

Have you had any name changes this employer should know about in order to verify job or education history? If yes, previous name? Do you have a preferred pronoun(s)? Yes No she/her he/his they/their other

Do you have transportaion to and from work? Yes No Are you authorized to work in the U.S.? Yes No

Who recommended you for this position? Date Available / / Expected Hourly Rate

Full Time Part Time Temporary Days Only Nights Only Days and Nights

How did you hear about this position?

PLEASE INDICATE YOUR DAILY AVAILABILITY BELOW BY PLACING AN X ON THE DAYS AND TIMES
***** YOU ARE ABLE TO WORK*****
SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY
10am-4pm 4pm - CL 10am-4pm 4pm - CL 10am-4pm 4pm - CL 10am-4pm 4pm - CL 10am-4pm 4pm - CL 10am-4pm 4pm - CL 10am-4pm 4pm - CL
AM PM AM PM AM PM AM PM AM PM AM PM AM PM

EDUCATION

SCHOOLING	Current or most recent	Grade or Degree	Did You Graduate?
HIGH SCHOOL	<input type="text"/>	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
COLLEGE OR UNIVERSITY	<input type="text"/>	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
OTHER (SPECIFY)	<input type="text"/>	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
MILLITARY SCHOOLS ATTENDED	<input type="text"/>	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
MILLITARY SERVICE RECORD	War Veteran Yes <input type="checkbox"/>	Branch <input type="text"/>	From <input type="text"/> To <input type="text"/> Highest Grade <input type="text"/>

Please list any skills, duties, or specialized training related to your military service that are relevant to the position(s) you're applying for.

PRIOR WORK EXPERIENCE/PREVIOUS RESTAURANT EXPERIENCE

	Current or most recent	Prior	Prior
Company Name			
Address			
Telephone			
Job Duties/Title			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position / Job Title			
Yearly Salary			
Reason for Leaving			
May we Contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

JOB DUTIES

Are there any job duties that you would be unable to perform?

is there anything we could do to accommodate you so you could perform all the required job duties?

Have you ever applied to this company before? Yes No

If yes, where?

When ? / /

Are you now employed? Yes No

Telephone number

EMERGENCY CONTACT

IN CASE OF EMERGENCY NOTIFY - (NAME, ADDRESS, PHONE) RELATIONSHIP, IF ANY

DISCLAIMER AND SIGNATURE

I authorize investigation of all statements contained in this application.

I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is substantially dependent on truthful answers to the forgoing inquiries.

I have read these statements and answers to these inquiries.

Date / /

Signature _____