Cattle Baron Restaurants, Inc.



First

Last Name





Date

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination on any basis; as in race, age, color, religion, sex, national origin, marital status, sexual orientation, medical condition, handicap, or any other protected status.

PERSONAL

Middle

Street Address How long ther	Home Telephone		
City, State, Zip	Emergency Contact Name		
Have you ever applied for employment with us or been employed with us?	Emergency Contact Telephone		
□Yes □No If yes, Month/Year Where			
Are you legally eligible for employment in the United States?	□No Pay Expected \$		
Position Desired and any other acceptable position	When will you be available to begin work?		
If you are applying for a "service" position, are you of legal age to serve alco			
Do you have friends/relatives working for Cattle Baron Inc.? □Yes □No	employer? □Yes □No		
If yes; please state name(s) What days do you prefer to work?			
Do you have transportation to and from work? □Yes □No	, , ,		
If no; how will you get to work?			
Are you restricted to working certain hours or days? □Yes □No	If yes: Do you have a Food Handlers Permit?		
	Do you have an Alcohol Certification?		
EDUCATION & OT	HER EXPERIENCE		
Did you graduate from High School? ☐Yes ☐No ☐ GED			
INSTITUTIONS OF HIGHER EDUCATION:			
Name of School :	Years Attended: From: To:		
Field of Study:	Did you graduate? □Yes □No		
Name of School :	Years Attended: From: To:		
Field of Study:	Did you graduate? □Yes □No		
List any special skills or experience that you feel should be considered for e	employment:		
List any extra curricular activities (excluding activities relating to religion, na	ational origin or gender)		
List any military experience if applicable:			

EMPLOYMENT EXPERIENCE

Name and location of last employer:	Name of Supervisor:	Starting Wage:	Ending Wage:
Reason for leaving:	Position Held:	Starting Date:	Ending Date:
Name and location of previous employer:	Name of Supervisor:	Starting Wage:	Ending Wage:
Reason for leaving:	Position Held:	Starting Date:	Ending Date:
Name and location of previous employer:	Name of Supervisor:	Starting Wage:	Ending Wage:
Reason for leaving	Position Held:	Starting Date:	Ending Date:
Please explain any gaps in your employment history: May we contact your former employers? Please explain any gaps in your employment history: May we contact your former employers?	no; please explain:		
Have you ever been terminated or asked to resign from a job?	□Yes □No If yes; please	explain:	
Briefly explain why you should be considered for employment.			
By signing this application for employment, I certify that pletely answered all questions. I understand that fals when such falsification is discovered. I also authorize application.	ification of any information	is grounds for immedia	ite dismissal, regardless of
It is the policy of Cattle Baron Restaurants, Inc. to have result in denial of employment. Additionally, upon emp partial disabilities and/or impairments.			
It is also the policy of Cattle Baron Restaurants, Inc. to United States. All potential employees will asked to veri			y authorized to work in the
Applicant Signature		Date	