

# Wishbone Restaurant

## APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION			
First name:	Last name:	Date:	
Present address (street, city, state, zip):			
Permanent address (street, city, state, zip):			
Home phone:	Cell phone:	SSN:	
Email address:		How did you hear about this position?	
Do you have the legal right to be employed in the USA?		Are you over 16?	Are you over 18?

AVAILABILITY						
Position desired:	Full Time or Part Time:	Date you can start:	Date you must stop:			
<b>WHAT DAYS &amp; HOURS WILL YOU BE AVAILABLE?</b>						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

EDUCATION			
SCHOOL	PROGRAM OR MAJOR	DEGREE/DIPLOMA/CERTIFICATE	DATE OBTAINED OR EXPECTED

WORK EXPERIENCE				
MONTH/YEAR	NAME, ADDRESS, PHONE OF EMPLOYER	SUPERVISOR	POSITION	REASON FOR LEAVING
from:				
to:				
from:				
to:				
from:				
to:				

**Your signature below provides consent to contact above references, and confirms all information supplied is true and correct.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_