

Application For Employment

Your Personal Background

Name: First _____ Middle I _____ Last: _____ Today's Date _____

Present Address _____ City _____ State _____ Zip _____

Home Telephone _____ Cell Telephone _____ E-Mail Address _____

In case of emergency, please notify: Name _____ Phone (H) _____ (W) _____

If you are younger than 18 years old, how old are you? _____

Do you have a reliable means of transportation to work? Yes No

Are you eligible to work in the U.S.? Yes No (PROOF OF ELEGIBILITY IS REQUIRED UPON EMPLOYMENT)

Have you ever been convicted of a felony? Yes No

How did you hear of us? _____

Your Previous Employment

From:	Company	Type of Bus.	Position held	Salary	Duties and Responsibilities
To:	Address	Phone	Supervisor	Commission	
Reason for leaving				Other	

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Reason for leaving				Other	

Your Availability

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	All Year	Yes	No
From								School Year	Yes	No
Until								Summer	Yes	No

Please Tell Us About Yourself

What are your interests and activities? _____

Please list awards and/or leadership positions held (work or school) _____

Continued on other side 

Your Education

	Name of School and City/State	Grade Point Average	Years Attended	Graduate?	Diploma Degrees
High School				Yes No	
College/ University				Yes No	
Other/ Vocational				Yes No	

Military Service: Yes No Branch _____ Rank _____ Start Date _____ End Date _____

Please describe your duties _____

Please Read The Following Statements Carefully and Sign

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby certify that I am drug free and acknowledge that if employed I give permission to random drug tests as required to maintain employment.

I hereby authorize the company, and any agent its designates, to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that the company has installed or may install surveillance cameras in the restaurant for safety and security purposes and may otherwise video-tape and/or record my performance and interaction with others in the restaurant for training and evaluation purposes. By signing below, I give my consent to such surveillance, video-taping, and recording.

I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's President.

Applicant's Signature

Date



OVER THE FALLS

Over The Falls is an equal opportunity employer. Applicants for all job openings are welcome and will be considered without regard to race, sex, age, religion, national origin, color, disability, citizenship, or veteran status or any other basis protected by law.