## Watch Hill Catering Application For Employment An Equal Opportunity Employer

	NAL: (Please Prin	nt)					Date:			
Name:Last		First			Middle Middle					
Address:	No.	Street				City	Ctata		7in Codo	
Telephone:		Street		E-Mail Address:		City	State		Zip Code	
If you under 18 years of age, could you furnish a work permit?										
Are you legally eligible for employment in this country?										
RESTAURANT / CATERING EXPERIENCE: (Please check any prior restaurant/ catering experience)  Management										
Waiter/\		_		□ Cook □ Bus/Dishwasher						
	waitress tore/Cashier	<u> </u>	Host/Hostess					Clerical/Office Admin.		
		Catering			Banquets			eleneal/office Admini.		
Other (Please Specify)  Position(s) applying for:										
Salary Desired:										
How did you hear about WHC? Do you know anyone who works at WHC?										
Have you ever been employed by WHC before?										
Are you currently employed?									□No	
May we contact your current employer?Yes									□No	
If position requires travel, do you have a valid drivers license?										
Have you ever been convicted of a felony in the last seven (7) years?										
List any special skills, experiences, or qualifications which may benefit you in the job for which you are applying:										
AVAILADII ITW. D. A. 1111										
AVAILABILITY: Date Available: Hours expected per week:										
PLEASE CHECK WHEN AVAILABLE										
*****Write AM or PM in available slots.*****										
MONDAY		TUESDAY	WE	DNESDAY	THURSDAY		FRIDAY	SATURDAY	SUNDAY	
AM										
PM										
EDUCATIONAL BACKGROUND		School Name and Address		Years Completed		Diploma Degree		Subjects Studied		
High School										
nigh Sch	1001	-								
College		<u> </u>								
Graduate	School									
Trade, Business or Vocational School										

EMPLOYMENT HISTORY: (List the last 3 employers, starting with the last one first. Include any volunteer activities or experience.) 1. Name and Address of Employer: Telephone: From: To: Job Title: Supervisor: **Describe Major Duties:** Reason For Leaving: Final Salary Start Salary \$ Per \$ Per 2. Name and Address of Employer: Telephone: Job Title: From: To: Supervisor: **Describe Major Duties:** Reason For Leaving: Start Salary Final Salary Per Per Telephone: 3. Name and Address of Employer: Supervisor: To: Job Title: From: **Describe Major Duties:** Reason For Leaving: **Start Salary Final Salary** Per Per **REFERENCES**: (List the names of three persons, not related to you, who have known you for at least two years.) NAME **ADDRESS OCCUPATION** PHONE # 1 3 PRE-EMPLOYMENT STATEMENT: "I certify that all the information submitted by me on this application form is true and complete. I authorize investigation of all statements contained on this application form and permit this organization to obtain any transcripts, records, or documents pertaining to my education, background, or business experience. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected or if I am employed, my employment may be terminated at any time. If any employment relationship is established, I understand that I retain the right to terminate my employment at any time and that this organization retains the same right. I also understand that my terms of employment can be changed at any time, with or without cause or notice by this organization. I also understand that I am required to abide by all rules and regulations of this employer." SIGNATURE: for employer use only-applicant do not write in this section Interviewed: Yes No Interviewer:\_\_\_\_\_ Date:\_\_\_\_\_ Remarks/Notes: Employed Yes No Job Title:\_\_\_\_ Rate of Pay: Employment Date:\_\_\_\_\_ Status: FT PT TEMP

Date:\_\_\_\_

Hiring Supervisor: