

MICHAEL'S RESTAURANT

APPLICATION FOR EMPLOYMENT FORM
www.michaelsofstockbridge.com

Please Print Clearly

Name: _____ Date: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone: _____ Cell# _____

Date of Birth: _____ Age _____

E-mail address: _____ @ _____

Position Desired - Please Answer All Questions.

Position applying for: _____ Desired Hourly Wage (Cooks Only) _____ Start Date: _____

Full or Part Time: _____ Days you can **NOT** work (Circle) M T W TH F S S

Do You Have Reliable Transportation: _____ Do you have experience in the job you are applying for _____

Are You Employed Presently? _____ If So Where? _____ will you be leaving your present job _____

Will You Be Leaving for School or any other reason? If So When? _____

FORMER EMPLOYMENT

Please put all previous employment on the back page.

Date Employed From: _____ To: _____ Your Position: _____

Name of Establishment: _____

Manager/Contact Person: _____ Phone: () _____

Reason for Leaving: _____

PLEASE PUT ANY ADDITIONAL INFORMATION ON BACK SIDE OF PAGE INCLUDING FORMER EMPLOYMENT OR REFERENCES!

Michael's is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

I, authorize investigation of all statements contained in this application. I understand that misrepresentation of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

DATE: _____ SIGNATURE: _____