



APPLICATION FOR EMPLOYMENT

Date: _____

D&S Cafeteria, Inc. is an equal opportunity employer and does not discriminate in employment or hiring on the basis of race, color, national origin, sex, religion, disability, age or veteran status.

INSTRUCTIONS: Please print and answer all questions. If a question does not apply to you, answer with "No" or "Not Applicable" (N/A).

PERSONAL INFORMATION:

Name _____ Social Security # _____
First Middle Last

Present Address _____

Home Phone _____ Mobile Phone _____

Are you under 18 years of age? Yes No

Are you legally eligible for employment in the U.S.? Yes No

Have you ever been employed under another name? If yes, please provide: _____

Former Name _____ Employer _____

D&S Position Applying For _____ Minimum Salary Requirement _____

Date You Can Start Work _____ Referred by: _____

Are you available and willing to work nights? _____ Saturdays _____ Sundays _____

Are you interested in working Part Time _____ Full Time _____ Temporary _____

EDUCATION:

	Name & Location of School	Years Attended	Date Graduated	Degree
High School				
College				
Trade School				
Other				

FORMER EMPLOYERS: Start with your current or last position.

Employer: _____	Address: _____	
Phone: _____	Dates Employed: _____	Position/Job Title _____
Salary: _____	Reason for Leaving: _____	
Summarize job duties: _____		
Supervisor's Name: _____	May we contact: Yes ___ No ___	

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Phone: _____	Dates Employed: _____	Position/Job Title _____
Salary: _____	Reason for Leaving: _____	
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Employer: _____	Address: _____	
Phone: _____	Dates Employed: _____	Position/Job Title _____
Salary: _____	Reason for Leaving: _____	
Summarize job duties: _____		
Supervisor's Name: _____	May we contact: Yes ___ No ___	

Please list personal references & telephone numbers:

APPLICANT'S STATEMENT:

I certify that all statements made on this application are true and correct to the best of my knowledge. I understand and agree that misrepresentation or omission of facts called for may result in termination of my candidacy for employment, or if discovered after employment, may result in termination of employment. I further understand that this application shall remain active for 30 days after which it will become inactive unless written re-application is made.

APPLICANT'S SIGNATURE _____ **DATE** _____

AUTHORIZATION TO CONTACT REFERENCES:

I authorize D&S Cafeteria, Inc. and its representatives to inquire of all former employers, schools and references. I further authorize my current and former employers, schools, and references to disclose information to D&S Cafeteria, Inc. upon request. I hereby release and hold harmless my current and former employers, schools and references who have provided information in connection with my application for employment.

APPLICANT'S SIGNATURE _____ **DATE** _____