



Employment Application

Please print legibly. The application must be fully completed to be considered. Please complete each section even if you attach a resume. Applications will be considered active for thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

Applicant Information

Full Name: _____ Date of Birth: _____
Last First M.I.

Address: _____
Street Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security Number: _____ Desired Salary: _____

Location(s) Applying for: _____

Position(s) Applying for: _____

Preferred Start Date: _____

ServSafe Certification Type/Expiration Date: _____

AVAILABILITY

MON	TUE	WED	THU	FRI	SAT	SUN

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Are you 18 years of age or older? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Emergency Contact

Name: _____ Relationship: _____ Phone Number: _____

Address: _____ City/State: _____ ZIP _____

References

Please list three (3) references

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Applicant Statement and Disclaimer

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: _____ Date: _____

Applicant Statement

DO NOT SIGN UNTIL YOU HAVE READ AND FULLY UNDERSTAND THIS STATEMENT

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time with or without notice, and the Company, Nostalgic Enterprises, LLC and all of its entities, has the same right. No one other than the owner(s) of the company has the authority to modify this relationship or make any agreement to the contrary. Any such modifications or agreement must be in writing. I also understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical exam to the extent permitted by law. I authorize the Company to investigate my criminal record, previous employment, and my educational background. This inquiry would include information as to my character, general reputation, and work ethics.

Signature

Date

Print Name