



Smoke House Market™

**Annie  
Gunn's**™

Employment Application is a service of the Missouri Restaurant Association

# Employment Application

(Please type or print. If you need additional space, please attach a second sheet.)

Date  
Applied:  
/ /

Position Applied For:

Salary Expected:

Full Name:

SSN:

Present Address:

Permanent Address:

Personal Phone:

Other Phone:

Have you ever worked under another name? Yes \_\_\_ No \_\_\_ If yes, list:

**Employment Record:** Record last position first. Failure to accurately account for all periods during the last seven years may lead to your application not being considered. If omissions or falsifications are discovered subsequent to your employment, such omissions or falsifications will be sufficient cause for discharge. (List periods of school as follows: School name under company name and dates attended.)

**I Can Work:**

- Full Time
- Part Time
- Temporary
- Permanent

**Times I Can Work:**

- Holidays
- Evenings
- Days
- Nights
- Overtime
- Split Shifts
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday
- Any Time

Start Date / /	Company Name/Address:	Supervisor:
Leave Date: / /		Phone:
Wage Start \$ End\$	Job Titles & Duties:	Reason for Leaving:

Were you unemployed between positions? Yes \_\_\_ No \_\_\_ How long? Why?

Start Date / /	Company Name/Address:	Supervisor:
Leave Date: / /		Phone:
Wage Start \$ End\$	Job Titles & Duties:	Reason for Leaving:

Were you unemployed between positions? Yes \_\_\_ No \_\_\_ How long? Why?

Start Date / /	Company Name/Address:	Supervisor:
Leave Date: / /		Phone:
Wage Start \$ End\$	Job Titles & Duties:	Reason for Leaving:

Were you unemployed between positions? Yes \_\_\_ No \_\_\_ How long? Why?

Have you ever been asked to resign or been fired for cause? Yes \_\_\_ No \_\_\_

Have you worked for this company before? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

May we contact your previous employers? Yes \_\_\_ No \_\_\_

Have you ever applied to this company before? Yes \_\_\_ No \_\_\_

Please list any previous employers you wish us not to contact \_\_\_\_\_

(Over, please)

## ***Educational Record***

Number of Years Completed:  Less than 8  8 to 12  12  13  14  15  16  More than 16

	Name	Degree Received	Course Work
High School			
Trade School(s)			
College (s)			

Are you older than 18? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you older than 21? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have reliable means to get to and from work? Yes \_\_\_\_\_ No \_\_\_\_\_

List the names of any relative working for this company and their relationship to you: \_\_\_\_\_

If an alien, do you have a legal right to be in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been denied a bond? Yes \_\_\_\_\_ No \_\_\_\_\_

If an alien, do you have the right to accept employment in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_ (*Upon employment, verification of legal employment status will be required.*)

Have you ever been convicted of a felony or misdemeanor other than a traffic violation? Yes \_\_\_\_\_ No \_\_\_\_\_ (*Such conviction may be relevant (if job related, but does not bar you from employment.)*)

List additional names of people working here who you know well: \_\_\_\_\_

Are you now or have you ever been in the military? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list branch of service \_\_\_\_\_

Highest rank obtained: \_\_\_\_\_ If in reserves: Active \_\_\_\_\_ Inactive \_\_\_\_\_

## ***References***

Name	Title	Phone	Years Known

## ***Important—Please Read Carefully***

*I hereby authorize investigation of all statements contained in this application, including inquiry of any and all of my former employers or references as indicated elsewhere in the application, and hold said former employers and/or references harmless from liability arising therefrom. I affirm that all the information contained in this application is true and correct, and that any misrepresentation, falsification or omission herein shall be sufficient reason for dismissal from, or refusal for employment. If employed, I understand that the company reserves the right to modify or terminate my employment at any time, with or without cause, and without prior notice. I further understand that the duration, hours, nature, compensation and benefits of my employment may be changed or modified from time to time without limitation or condition. I understand that no representative of the company has any authority to make any assertions to the contrary. I hereby agree to abide by all policies and rules of this company which govern dress, hair, grooming and attitude.*

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

### ***For Office Use Only:***

Hire Date: \_\_\_\_\_ Date Work to Start \_\_\_\_\_ Rate of Pay Offered \_\_\_\_\_  
 Type of Position Offered \_\_\_\_\_ Hours of Work Offered \_\_\_\_\_  
 Authorized Personnel \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_