**JAKERS** 

**BAR AND GRILL** Jakers Bar and Grill is an equal opportunity employer. Various federal, state and local laws prohibit discrimination based on race, color, sex, religion, national origin, ancestry, age, disability or marital status. Jakers is an equal opportunity employer and your response to any question will not be used as a basis for discrimination, but will be judged on its relevance to the position you are seeking.

Personal Information								Date / /				
Name (Last)			irst Middle						Social Security Number			
Home Address			City						State Zip			
Home Telephone			Business Telephone ( )					1	May we contact you at work?  ☐ Yes ☐ No			
Position Applying for			Date Available / /						Are you interested in: (Check all that apply) □ Full-time □ Part-time □ Temporary □ Summer			
Days and	hours a	vailable	e. Comp	lete if ap	plying f	or resta	urant po	sition.	How were y	ou referred to	Jaker's?	
Day From To	Mon	Tue	Wed	Thu	Fri	Sat	Sun		Are you over 19 years of age?  ☐ Yes ☐ No If not, please enter your date of birth.			
Educa	tion											
Type of school			Name and location of school						Degree/Area of Study	Number of Years Attended	Graduated (check one)	
High School			Name Address								□ Yes □ No	
			City State Zip									
College			Name Address					<del></del>			☐ Yes ☐ No	
Graduate			City Name			State Address	Ziţ	)			□ Yes □ No	
School			City			State Zip					2 700 2 110	
Other			Name Address								☐ Yes ☐ No	
			City State Zip					)				
US Mil	itary \$	Servi	ce						•	•	•	
Branch of Service				Technical Specialization				Rank Attained				
(Identity and e	employment ver dischar	eligibility of	of all new hi	res will be v	erified as r s □ No If	equired by yes, give	the immigra		I Act of 1986)			
Have you ev	ver been c	onvicted ormation be	of a crime e asked of y	other thar	n a minor dered in en	traffic viola	ation? (No	The existence	bbligated to discuss	ord will not autom	d records of conviction natically disqualify	

## **Employment History**

List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. May we contact your present employer?  $\square$  Yes  $\square$  No Please indicate if you were employed under a different name

Dates	Name and Address of Employer	Position Held And Supervisor	List Major Duties	Salary Or Wages	Reason for Leaving			
	or Employer	7 tha Sapervisor	Dutico	Ol Wages	Loaving			
From: /	Name	Your Job Title		Starting				
mo. yr. To:	Address City	Supervisor		Final				
mo. / yr.	State Phone ( )							
From:	Name	Your Job Title		Starting				
mo. yr.	Address City	- Companying		Final				
To:/	State Phone	Supervisor		Final				
mo. yr. From:	Name	Your Job Title		Starting				
mo. / yr.	Address City							
To: /	State Phone	Supervisor		Final				
mo. yr.	( )							
From:/	Name	Your Job Title		Starting				
mo. yr. To:	Address City	Supervisor		Final				
mo. / yr.	State Phone ( )							
City & State Supervisor Reason for leavin  Reference		Position held  Dates Employed Fi	rom:					
Business Referen	ces: (do not list relatives) (please indica	te if you were employed under a diffe			Years Known			
Name	Address	( )		nue	rears Known			
		( )						
		( )						
	READ CAREFULLY: with my authorization, an investigation r	may be made whereby information is	obtained regar	ding my charact	er, previous employ-			
ment, general rep	utation, educational background, credit r	record and/or criminal history, subject	to applicable f	ederal, state an	d/or local laws.			
	nployment, I understand that false or mis , also, that I am required to abide by all p			iew(s) may resu	It in immediate termina-			
for any reason, or	agree that if employed, the employment for no reason. I understand that receipt nents are not contracts of employment							
APPLICANT'	S SIGNATURE	DATE SIG	DATE SIGNED					
	<del></del>			<del></del>				