



Application For Employment

Date

Personal Information

Name (Last Name First)		Social Security No.	
Address		City	State
		Zip Code	
Home Phone		Date Of Birth or Are You At Least 21?	
Cell or Other Phone		Referred By	

Employment Desired

Position Desired	Date You Can Start	Salary Desired
Are You Employed? <input type="checkbox"/> YES <input type="checkbox"/> NO	If So May We Inquire Of Your Present Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Will This Be A Second Job? <input type="checkbox"/> YES <input type="checkbox"/> NO	Which Location Are You Applying For: Bottoms Up or White Rhino	
Ever Applied to This Company Before? <input type="checkbox"/> YES <input type="checkbox"/> NO	If Yes, When?	
Specify Hours Available For Each Day Of The Week	Sunday	Monday
	Tuesday	Wednesday
	Thursday	Friday
	Saturday	

	Name & Location	Years Attended	Did You Graduate?	Subjects Studied
High School		1 2 3 4	Y N	
College		1 2 3 4	Y N	
Post College		1 2 3 4	Y N	
Trade or Business School		1 2 3 4	Y N	

Subjects of Special Study, Skills, Or Training

Have You Ever Visited Bottoms Up Or White Rhino? Describe Your Experience.

Why Would You Like To Work For This Company?

Describe A Specific Situation Where You Have Provided Excellent Customer Service In Your Most Recent Position. Why Was This Effective?

Military or Naval Service	Rank
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Former Employers

From	Name & Address of Employer	Starting Salary	Position	Reason For Leaving
To		Ending Salary		
Duties Performed				Avg Hours Per Week
Supervisors Name		Phone	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	

From	Name & Address of Employer	Starting Salary	Position	Reason For Leaving
To		Ending Salary		
Duties Performed				Avg Hours Per Week
Supervisors Name		Phone	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	

From	Name & Address of Employer	Starting Salary	Position	Reason For Leaving
To		Ending Salary		
Duties Performed				Avg Hours Per Week
Supervisors Name		Phone	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	

From	Name & Address of Employer	Starting Salary	Position	Reason For Leaving
To		Ending Salary		
Duties Performed				Avg Hours Per Week
Supervisors Name		Phone	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	

References

Name	Address	Business	Years Known
1			
2			
3			

I hereby authorize Bottoms Up Sports Bar & Grill and/or White Rhino Bar & grill to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted to provide any relevant information regarding my current and/or previous employment and I release all Persons, schools, employers of any and all claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that I may be required to sign a confidentiality and/or non-compete agreement, should I become an employee of Bottoms Up Sports Bar & Grill or White Rhino Bar & Grill. I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Bottoms Up Sports Bar & Grill or White Rhino Bar & Grill to hire me.

I understand that and agree that my employment is at will, which means that it is for no specified period and may be terminated by me, Bottoms Up Sports Bar & Grill, or White Rhino Bar & Grill at any time without prior notice for any reason.

Signature _____

Date _____