



**Instructions & Checklist
Employment Application**

This package contains:

- (1) Instructions and Checklist for the Employment**
- (2) Employment Application.**

[] This application makes assertions regarding the company's practice of providing equal employment opportunities; review your company's policy to ensure its accuracy.

[] The applicant should sign the employment application.

[] If the applicant is hired, a copy of their employment application should be kept with their other employment records.

[] Laws vary from time to time and from state to state. These forms are not intended to be and are not a substitute for legal advice. Employers should consult with their attorneys before using this application to ensure that it complies with all laws.

[] The purchase and use of these forms is subject to the "Disclaimers and Terms of Use" found at findlegalforms.com.



Citrus City Grille
 122 N. Glassell Street
 Orange, CA 92866

Date:

APPLICANT INFORMATION

Last Name		First		M.I.	Date	
Street Address				Apt #		
City		State		ZIP		
Phone		E-mail Address				
Date Available		SSN		Desired Salary		
Position Applying for						
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

EDUCATION

High School		Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College		Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other		Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			



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
		<input type="checkbox"/>	<input type="checkbox"/>
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
		<input type="checkbox"/>	<input type="checkbox"/>
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
		<input type="checkbox"/>	<input type="checkbox"/>

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

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
-----------	------