

TWELVE STONES RESTAURANT

Employment Application



NOTICE: Applicant should read the following information carefully before filling out any of the questions on this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any prohibited by law.

APPLICANT INFORMATION						
Last Name		First		M.I.	Date	
Street Address				Apartment/Unit #		
City		State		ZIP		
Phone			E-mail Address			
Date Available		Social Sec No.		Desired Salary		
Are you applying for (Check all that apply)? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Days Only <input type="checkbox"/> Nights Only <input type="checkbox"/> Days/Nights						
Position Applied for						
Date of birth: ____/____/____						
If under age 18, how many hours per week are you employed elsewhere? _____ hours						
Are you authorized to work in the US?	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?			
During the past five (5) years, have you been convicted of, or have you pled guilty or no contest to, a felony offense? YES <input type="checkbox"/> NO <input type="checkbox"/> (Answering "yes" to this question will not automatically bar you from employment unless applicable law requires such action.)				If yes, please explain in the space below.		

EDUCATION						
High School or GED			Address			
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma
College/ University			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

** If you need more room, please continue on back of application

REFERENCES		
<i>Please list three professional references.</i>		
Full Name		Relationship
Company		Phone ()
Address		

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Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			

PLEASE CHECK KIND OF WORK DONE			
<input type="checkbox"/> Bartender	<input type="checkbox"/> Dietician	<input type="checkbox"/> Pastry Cook	<input type="checkbox"/> Wait Staff
<input type="checkbox"/> Bookkeeper	<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Porter	<input type="checkbox"/> Wait Staff-Arm Service
<input type="checkbox"/> Bus Person	<input type="checkbox"/> Food Prep Technician	<input type="checkbox"/> Pot Washer	<input type="checkbox"/> Wait Staff-Tray Service
<input type="checkbox"/> Carver	<input type="checkbox"/> Fountain	<input type="checkbox"/> Salad	
<input type="checkbox"/> Chef	<input type="checkbox"/> Host or Hostess	<input type="checkbox"/> Sandwiches	
<input type="checkbox"/> Cook	<input type="checkbox"/> Kitchen Helper	<input type="checkbox"/> Stenographer	
<input type="checkbox"/> Cook Helper	<input type="checkbox"/> Manager	<input type="checkbox"/> Typist	
<input type="checkbox"/> Counter	<input type="checkbox"/> Pantry	<input type="checkbox"/> Vegetable Cook	

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	<input type="checkbox"/>	NO	<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	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company					Phone	()				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						

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PREVIOUS EMPLOYMENT (CONT.)									
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 <input type="checkbox"/>	NO <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 <input type="checkbox"/>	NO <input type="checkbox"/>			
Company							Phone		()
Address							Supervisor		
Job Title					Starting Salary		\$		Ending Salary \$
Responsibilities									
From		To		Reason for Leaving					

DISCLAIMER AND SIGNATURE									
<ol style="list-style-type: none"> I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S. I understand Twelve Stones, LLC will check with the Texas Department of Public Safety, the Federal Bureau of Investigation or other organizations, for any criminal history in accordance with applicable statutes. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages with may result from furnishing such information to you. 									
Signature						Date			