

NAME OF COMPANY	ADDRESS	PHONE NUMBER	NAME OF SUPERVISOR
TYPE OF WORK PERFORMED		DATES EMPLOYED FROM / /	TO / /
REASON FOR LEAVING		STARTING WAGE \$ / HOUR	LAST WAGE \$ / HOUR

REFERENCES

(INCLUDE ONLY INDIVIDUALS FAMILIAR WITH YOUR WORK ABILITY. DO NOT INCLUDE RELATIVES.)

NAME	OCCUPATION/POSITION	ADDRESS	PHONE
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EDUCATION

CIRCLE NUMBER OF SCHOOL YEARS ATTENDED: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16+	
ADDITIONAL TRAINING (CHECK THOSE THAT APPLY): <input type="checkbox"/> Business School <input type="checkbox"/> Vocational School <input type="checkbox"/> College <input type="checkbox"/> Other _____	
NAME/LOCATION	
COURSE STUDY	DEGREE
DO YOU HAVE ANY SUPERVISING EXPERIENCE? <input type="checkbox"/> NO <input type="checkbox"/> YES IF YES, EXPLAIN:	
WHAT QUALIFICATIONS MAKE YOU SUITABLE FOR THE POSITION FOR WHICH YOU ARE APPLYING?	
WHAT DOES THE PHRASE "THE CUSTOMER IS ALWAYS RIGHT" MEAN TO YOU?	

I affirm that the above information is correct. I understand that any false or misleading statements on this application may be cause for dismissal if I am employed. I hereby authorize my former employers, educational institutions, and references to furnish any information concerning my application for employment and release them from any claims or liability for doing so. I further authorize Grandma's, Inc. to contact my former employers, educational institutions, and references for the purpose of obtaining such information. I understand that my employment can be terminated at any time and for any reason by me or by Grandma's, Inc., no matter what anyone may have told me. I agree, as a condition of hire, to provide documents establishing proof of identity and employment eligibility in compliance with the Immigration Reform and Control Act of 1986. Further, I understand that all Grandma's, Inc. employees are required to adhere to the Drug and Alcohol Policy.

Signature of Applicant

Date

FOR OFFICE USE ONLY

<input type="checkbox"/> HIRED	STARTING DATE	STARTING WAGE	JOB CLASSIFICATION	EMPLOYEE NUMBER
<input type="checkbox"/> NOT HIRED				



Pre-Interview Form

Availability

Indicate below what days and times you can work

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Start Time							
End Time							

List the specific dates that you will need off in the next 6 months
(i.e. vacations, weddings, reunions, etc.)

How long would you like to work for us? (circle summer or winter)

Summer/Winter Only Summer/Winter plus school breaks Year round

If you are only available seasonally, when do you need to leave? _____

How many *shifts* per week would you like to work?

Two or less Three to Four Five to Six As many as possible

Experience

Check the positions in which you have previous work experience:

Cashier Cocktail Server Bartender Salad Prep Fast Food
 Host Food Server Bar Back Dishwasher Manager
 Busser Food & Liq Server Prep Cook Line Cook Chef

Check the positions that you are interested in:

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Do you have reliable transportation to and from work (including late nights?)

YES NO

This position may require regular lifting of up to 40 pounds.

Is there any reason why you would be unable to perform such tasks? YES NO

If you indicated that you are unable, please explain: _____

Print Name: _____

Sign Name: _____ Date: _____