

EDGEWATER RESTAURANT
EMPLOYMENT APPLICATION

DATE: _____

NAME: _____

PHONE #: _____

DATE OF BIRTH: _____

ARE YOU A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA?: _____

ADDRESS: _____

LIST PRIOR RESTAURANT JOBS, LENGTH OF WORK AT EACH JOB & POSITIONS:

1 _____

2 _____

3 _____

REFERENCES:

1 _____ PHONE # _____

2 _____ PHONE # _____

HAVE YOU EVER USED A RESTAURANT COMPUTER? _____

DO YOU KNOW PROPER WINE PRESENTATION? _____

WHAT POSITION ARE YOU APPLYING FOR? _____

HOW MANY SHIFTS WOULD YOU LIKE TO WORK? _____

ARE YOU AVAILABLE TO WORK ON SUNDAYS? _____

CIRCLE THE NIGHTS YOU WOULD BE ABLE TO WORK:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY