



Department & Position Applying for:
 Dept: _____ Position: _____

APPLICATION FOR EMPLOYMENT

Name _____

Are you at least 18 years old? _____ If not specify _____

Address _____

Phone # _____ Phone # (2) _____

Email _____

Person to notify in case of emergency _____

Relationship _____ Telephone # _____

1. FULL TIME EMPLOYEES MUST BE AVAILABLE TO WORK EVERY DAY OF THE WEEK.
 Are you available for the position applying for on a full time basis? Yes _____ No _____

2. Would you have any special circumstances that would keep you from performing the job you are applying for? Yes _____ No _____

Please explain If you answered "YES" to the above question:

3. Work Experience

Place of Employment

Dates of Employment

Present Employer _____

Phone _____

May we call your past and present employers? Yes _____ No _____

If you answered no please explain:

4. Include the name & phone number of at least two employment references NOT related to you.

1. _____
2. _____

EMPLOYMENT AT DRUNKEN JACK'S IS AT WILL AND CAN BE TERMINATED BY THE EMPLOYER OR THE EMPLOYEE AT ANY TIME.

***Signature** _____ **Date** _____