

LILI'S BISTRO ON MAGNOLIA

Employment Application



bistro on magnolia

APPLICANT INFORMATION												
Last Name			First			M.I.		Date				
Street Address						Apartment/Unit #						
City				State		ZIP						
Phone			E-mail Address									
Date Available			Social Security No.			Desired Salary						
Position Applied 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												
<i>Please list three professional references.</i>												
Full Name			Relationship									
Company			Phone			()						
Address												
Full Name			Relationship									
Company			Phone			()						
Address												
Full Name			Relationship									
Company			Phone			()						
Address												

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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						
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"/>					
MILITARY SERVICE										
Branch				From			To			
Rank at Discharge				Type of Discharge						
If other than honorable, explain										

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ADDITIONAL INFORMATION

1. Why did you leave your last job (or want to leave your present job)?

2. Which position are you interested in? Why? Are you interested in any other positions?

3. How many days a week do you prefer to work? Weekends?

4. Why did you leave your last job (or want to leave your present job)?

5. What was the most challenging part of your last job or class?

6. What was the most challenging thing you have had to adapt to in the workplace?

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ADDITIONAL INFORMATION

7. You've been assigned to work with someone you don't like. What would you do?

8. Imagine you observed a good friend of yours stealing something from the store/restaurant where you worked. What would you do?

9. Imagine that a co-worker told you she punched herself into the time clock fifteen minutes before she started work. What would you do?

10. If we hire you, what expectations do you have of the company?

NOTES:

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