Warren's Station

A Family Restaurant
Rt 1, Ocean Highway

mail: Rt 3 Box 415A
Fenwick Island, DE 19944

http://www.WarrensStation.com/
inquire@WarrensStation.com

Application for Employment

Personal Information **Date** _____

Name _____
Last First Middle Social Security Number

Current address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone (____) _____ (____) _____ Are you 19 years old or older? ☐ yes ☐ no
Current Permanent

Position desired _____ Date you can start _____ Salary desired _____

Are you interested in ☐ full-time ☐ part-time

Are you employed now? ☐ yes ☐ no

Do you have a legal right to work in the United States? ☐ yes ☐ no _____
Alien Registration #

Please tell us how you found out about **Warren's Station**:

_____

_____

_____

All qualified applicants for employment will receive consideration for employment without regard to race, creed, sex, national origin, or disability as described by the Americans with Disabilities Act of 1990. The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age to individuals who are at least 40 but less than 70 years of age.

Please complete page 2 as well.

Education	Name and location of school	**Number of years attended**	**Did you graduate?**	**Subjects studied**
High School				
College or University				
Other Education				

Employment History

Please list all jobs, beginning with your present or last employer. Account for all periods, including unemployment, self-employment, school and any military service.

Company Name and Address			Job Title	
			Supervisor's Name and Phone	
Date		Type of Business	Job Duties & Responsibilities	Reason for Leaving
Start M/Y	End M/Y			
Company Name and Address			Job Title	
			Supervisor's Name and Phone	
Date		Type of Business	Job Duties & Responsibilities	Reason for Leaving
Start M/Y	End M/Y			
Company Name and Address			Job Title	
			Supervisor's Name and Phone	
Date		Type of Business	Job Duties & Responsibilities	Reason for Leaving
Start M/Y	End M/Y			

References from Other Jobs

Name	Occupation	Address & Phone Number

Who to contact in case of emergency _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge and I agree you may investigate my statements. I agree to permit all past employers to give any information concerning me and release them from any liability in furnishing such information. I understand, if employed, false statements on this application shall be considered sufficient cause for dismissal. I understand that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages, be terminated at any time without prior notice.

_____

date signature

INTERVIEW:

I agree to be paid at the following salary: _____ per hour/week for the position of _____

New hire signature _____ team leader signature _____ start date / /

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