

CAPTAIN'S TABLE RESTAURANT

EMPLOYMENT APPLICATION

Webb's Captain's Table Restaurant considers it a duty as a responsible employer to practice the philosophy of equal employment opportunity through our actions. Thus, we will recruit, hire, train and promote persons in all job classifications solely on the basis of their qualifications, without regard to race, color, religion, creed, sex, gender identity/expression, age, national origin, citizenship status, disability, veteran status, military status, marital status, sexual orientation, pregnancy, arrest records, domestic violence victim status, predisposing genetic characteristics or genetic information, reproductive health decision-making or any other category as protected by law.

Date: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Home phone

Position Desired: _____ Pay Expected: _____
Cell phone

Have you ever applied for employment with us? yes no If yes: month & year _____

Are you available for full-time work? yes no Are you available for part-time work? yes no

What days and hours are you available to work? _____

Are you available to work overtime if asked? yes no

Are you legally eligible for employment in the United States? yes no

When will you be available to begin work? _____

EDUCATIONAL BACKGROUND

School	School Name and Location	Course of Study	No. of Years Completed	Did you graduate?	Degree or Diploma
Graduate				<input type="checkbox"/> yes <input type="checkbox"/> no	
College				<input type="checkbox"/> yes <input type="checkbox"/> no	
Business/Trade Technical				<input type="checkbox"/> yes <input type="checkbox"/> no	
High School				<input type="checkbox"/> yes <input type="checkbox"/> no	
G.E.D.				<input type="checkbox"/> yes <input type="checkbox"/> no	

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record.
Start with your current or most recent employer.

1. Company Name	Telephone ()
Address	Employed – (state month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving
2. Company Name	Telephone ()
Address	Employed – (State month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact:

Employer Name: _____ Reason: _____

PERSONAL or PROFESSIONAL REFERENCES

1. Name	Telephone	Relationship	Length of Relationship
2. Name	Telephone	Relationship	Length of Relationship

MILITARY

Did you serve in the U.S. Armed Forces? yes no If yes, in what Branch _____

Describe any training received relevant to the position for which you are applying: _____

SIGNATURE

I hereby attest that the information provided in this Employment Application is true, correct and complete. I recognize that any misstatement or omission of fact on this application may result in me not being hired; or, if hired, may result in my dismissal. I also understand that acceptance of an offer of employment creates no obligation upon Webb's Captain's Table Restaurant, the employer, to continue to employ me in the future. If employed by Webb's, I agree to conform to Webb's work rules and policies. So too, I agree and understand that my employment can be terminated, with or without cause, and with or without notice, at any time, for any legal reason. I recognize that my employment is at-will, and I have the right to resign for any reason.

Signature: _____ Date: _____

I, _____ am willing to work holidays and weekends with no exceptions.

If you have a resume, please attach.