

# HIBACHI ROCK – LIVE GRILL & SUSHI BAR

## EMPLOYMENT APPLICATION

### APPLICANT INFORMATION

Last Name		First		M.I.	Today's Date	
Street Address				Apartment/Unit #		
City		State		ZIP		
Phone		E-mail Address				
Position Applying For						
Wage Requirements (Please enter an hourly range . . .)						
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						
Are you a smoker? (Optional) YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, can you last a 7 hour shift without smoking? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Are you 16 Years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No (For Alcohol Handling Positions) Are you 18 Years of Age or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Are you TABC Certified? <input type="checkbox"/> Yes <input type="checkbox"/> No Birth Date:						

### 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	

### AVAILABILITY

Type of Position  Part-Time  Full-Time  Temporary  Seasonal

Are you able to meet the attendance requirements of the position?  Yes  No

Total hours available per week: \_\_\_\_\_ Earliest date available to start work: \_\_\_\_\_, training: \_\_\_\_\_

Mark your shift availability ( All, Lunch, Dinner):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

### DESCRIBE YOUR DINING EXPERIENCE, QUALIFYING SKILLS, & SPECIAL ABILITIES

<b>PREVIOUS EMPLOYMENT (MOST RECENT FIRST)</b>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities / Job Duties			
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 / Job Duties			
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 / Job Duties			
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 / Job Duties			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**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 \_\_\_\_\_

<b>Interviewed:</b>	
<b>Hired On:</b>	
<b>Starts Training:</b>	
<b>Starts Work:</b>	

**Notes:**