



AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of Lock Sixteen, to provide employment opportunities without regard to race, color, religion, sex, national origin, age, handicap, or veteran status.

Please Check Which Location You are Applying For:

Catering ~ Ottoville

Steakhouse ~ Lima

PERSONAL DATA

FIRST NAME MIDDLE LAST SOCIAL SECURITY NUMBER

PRESENT ADDRESS IN FULL CITY STATE ZIP TELEPHONE

PERMANENT ADDRESS (IF DIFFERENT THAN ABOVE) CITY STATE ZIP TELEPHONE

APPLICATION FOR EMPLOYMENT

DATE OF BIRTH: ____ - ____ - ____

POSITION DESIRED: _____

DATE YOU CAN START: _____

WHAT OTHER POSITIONS COULD YOU FILL TEMPORARILY: _____

PLEASE STATE WHY YOU WOULD BE A GOOD EMPLOYEE IN THE DESIRED POSITION:

DO YOU HAVE ANY PRE-EXISTING CONDITION WHICH WOULD INTERFERE WITH OR LIMIT YOUR ABILITY TO PERFORM THE JOB? ____ YES ____ NO

IF YES, PLEASE EXPLAIN _____

DO YOU HAVE OBJECTIONS TO WORKING WEEKENDS? ____ YES ____ NO

DO YOU HAVE OBJECTIONS TO WORKING EVENINGS? ____ YES ____ NO

DO YOU HAVE OBJECTIONS TO WORKING HOLIDAYS? ____ YES ____ NO

DO YOU HAVE DEPENDABLE TRANSPORTATION TO WORK? ____ YES ____ NO

HAVE YOU EVER BEEN FIRED FROM A JOB? ____ YES ____ NO

IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY IN THE LAST 10 YEARS?

____ YES ____ NO

IF YES PLEASE EXPLAIN: _____

EMPLOYMENT HISTORY

LIST MOST RECENT EMPLOYER FIRST

1.

NAME OF COMPANY	CITY/STATE	EMPLOYED FROM/TO	WAGE
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POSITION HELD	DUTIES	REASON FOR LEAVING
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2.

NAME OF COMPANY	CITY/STATE	EMPLOYED FROM/TO	WAGE
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POSITION HELD	DUTIES	REASON FOR LEAVING
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3.

NAME OF COMPANY	CITY/STATE	EMPLOYED FROM/TO	WAGE
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POSITION HELD	DUTIES	REASON FOR LEAVING
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REFERENCES

1.

NAME	HOME PHONE	WORK PHONE	YEARS AQUAIANTED
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2.

NAME	HOME PHONE	WORK PHONE	YEARS AQUAIANTED
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3.

NAME	HOME PHONE	WORK PHONE	YEARS AQUAIANTED
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I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUR ANY PREVIOUS NOTICE.

DATE: _____ **SIGNATURE:** _____