



Employee Application

FILL IN CAPITAL ONLY

Employer Interview Note



Employee Application

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Personal Information

First Name	Middle Initial	Last Name	
Address		City	
State		Zip Code	
Social Security #		()-()-()	
Gender (Circle One)		Male	Female
Date of Birth:		If under 18, please list age	
Marital Status (Circle One)		Single	Married
Are you legally eligible to work in the USA (Circle One)	Yes	No	
Are you U.S Citizen (Circle One)	Yes	No	If not provide USCIS # ()-()-()
If you selected are you willing to submit a background check and drug test (Circle On)		Yes	No
Can we contact your previous employer (Circle One)	Yes	No	
Have you ever been convicted of a crime (Circle One)	Yes	No	
If yes, explain,			
Do you have a reliable transportation to work (Circle One)	Yes	No	
Do you have Driving License (Circle One)	Yes	No	If yes which state
Driving License #	Expiration Date		
Have you had any accident during the past 3 years	Yes	No	If yes how many?
Have you had any moving violations during the past 3 years	Yes	No	If Yes how many?
Have you ever been in the armed forces	Yes	No	
Are you now a member of the national guard	Yes	No	Detail

Contact Detail



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Mobile No:		Email:	
Emergency Contact Name		Emergency Contact No	

Position

Position you are applying for	Available Start Date	Desired Pay	
Employment Desired (Circle One)	Full Time	Part Time	Seasonal / Casual
How many hours can you work weekly		Can you work nights	Yes No

Available Time

Mon	Tue	Wed	Thur	Fri	Sat	Sun

Experience

Expertise in area	Wine	Spirits	Whiskey	Beer	Cashier
Years of Experience					

Education

School/University Name	Major & Degree	GPA	Year	Completed or Not

References (Business and professional Only)

Company Name	Person Name	Title	Contact No
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Employment History

Company Name	Job Title	Date Employed
Work Phone	Pay Rate	Reason for Leaving
Address	City	State & Zip Code
Company Name	Job Title	Date Employed
Work Phone	Pay Rate	Reason for Leaving
Address	City	State & Zip Code
Company Name	Job Title	Date Employed
Work Phone	Pay Rate	Reason for Leaving
Address	City	State & Zip Code

Signature Disclaimer

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 employment being terminated.



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Name	Signature
Date	