

The Brooklyn Grill

607 South Main Street
Oshkosh WI 54902
920.230.4477

Circle Position Applying For:

Kitchen
Bar
Dining Room
Other:

Application for Employment

Please answer all questions.
We are an equal opportunity employer.

NOTICE: Applicant should read the following information carefully before filling out any of the questions in this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek out and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any purpose prohibited by law.

NAME: Last First Middle Social Security Number

Present Street Address City State Zip

Phone How long have you lived at the above address? _____

Are you 18 years or older? Y N Date of Birth: _____

If under the age of 18, how many hours per week are you employed elsewhere? _____

Have you had any name changes this employer should know about in order to verify education or job history? Y N
Previous name: _____

Do you have transportation to and from work? Y N Are you authorized to work in the US? Y N

Position applied for? _____ Date you can start: _____ Salary desired: _____

Circle what you are applying for: Full time Part time Temporary Days only Nights only Days/Nights

Who recommended you for this position? _____

Please circle the kind of work you have done in the past:

Bartender	Cashier	Pantry	Vegetable Cook
Bookkeeper	Dietician	Pastry Cook	Wait Staff
Bus Person	Dishwasher	Porter	Wait Staff - Arm Service
Carver	Food prep Technician	Pot Washer	Wait Staff - Tray Service
Chef	Fountain	Salad	
Cook	Host or Hostess	Sandwiches	
Cook Helper	Kitchen Helper	Stenographer	
Counter	Manager	Typist	

EDUCATION				
SCHOOLING	NAME AND ADDRESS OF SCHOOL	GRADE OR DEGREE COMPLETED	Graduate?	
			Y	N
High School				
College or University				
Others (Specify)				
Military Service Schools Attended				
Military Service Record	War Veteran: Y N	Branch:	From: (Date)	To: (Date)

Previous Employment Experience

(List below any restaurant work, or your last four employers beginning with the most recent, if no restaurant experiences apply)

EMPLOYMENT: Last Company First	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
Company name: Address: Phone:					From:		
					To:		

EMPLOYMENT: Last Company First	COMPANY BUSINESS	YOUR POSITION	IMMEDIATE SUPERVISOR	TITLE	EMPLOYMENT DATES	YEARLY SALARY	REASON FOR LEAVING
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Company name: Address: Phone:					From:		
					To:		

Which days/hours are you available to work?

Monday:	am/pm to	am/pm.	Friday:	am/pm to	am/pm
Tuesday:	am/pm to	am/pm.	Saturday:	am/pm to	am/pm
Wednesday:	am/pm to	am/pm.	Sunday:	am/pm to	am/pm
Thursday:	am/pm to	am/pm.			

Not available to work the following: _____

Because: _____

Are you available to work holidays? Y N If no, explain why: _____

How many hours would you like to work? (Circle) 15-20 hours 20-30 hours 30-40 hours
(If you are under the age of 18, Child Labor Laws for maximum hours will apply)

If you are under age 18, are you able to work: Nights and weekend shifts, 1 school night close per week + weekends: Y N

If you are under age 18 do you need your parents consent to seek employment? Y N

Anything else we should know about your relationship and experiences with your previous employers? _____

Experience Waitress: Arm or Tray Service? _____

Why do you want to work at The Brooklyn Grill? _____

If you are replacing another job, why? _____

What goals and plans have you set for yourself over the next 3 years? _____

As an employees of The Brooklyn Grill you may be on your feet for long periods of time, sometimes up to 8 hours. Have you had any problems in the past that would hinder your ability to do this? _____

List all activities (jobs/sports/clubs) current and future and the time it involves, and any challenges with you being able to handle in conjunction with work: _____

Miscellaneous:

Are there any job duties that you would be unable to perform? _____

Is there anything we could do to accommodate you so you could perform all the required job duties? _____

Have you ever applied at The Brooklyn Grill before? Y N If yes, when? _____

Are you currently employed? Y N Where: _____ Phone Number: _____

If hired, when are you available to start? _____

Is all of the information on your application correct? Y N

IN CASE OF EMERGENCY PLEASE NOTIFY:

Name	Address	Phone	Relationship to you
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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 and that my employment is substantially dependent on truthful answers to the foregoing inquiries. I have read these statements and answers to these inquiries. Y N

Date: _____ Signature: _____