



GRUBY'S NEW YORK D • E • L • I

Position Applying For:

Application Date:

Desired Wage Rate: _____

Employment Application

Name: _____
First Middle Initial Last

Address: _____
Street Address City State Zip Code

Primary Telephone: (_____) _____ - _____ Home Cellular Other

Secondary Telephone: (_____) _____ - _____ Home Cellular Other

Social Security #: _____ - _____ - _____

Are you legally eligible for employment in the U.S.A.? Yes (verification required) No

Are you reasonably able to perform the essential functions of the position, with or without accommodations? Yes No

What shifts are you available? Breakfast Lunch Other: _____

When are you available to start your employment? _____

If appropriate for the position, are you at least 16 years of age? Yes No 18 years? Yes No N/A

Emergency Contact:

Name: _____ Relationship: _____

Address: _____

Telephone #: (_____) _____ - _____

Education:

High School Name: _____ Years Attended: _____ Graduate? Yes No

College/University Name: _____ Years Attended: _____ Graduate? Yes No

Other Name: _____ Years Attended: _____ Graduate? Yes No

Job Related Education: _____

Military Service: Yes No

Rank & Branch: _____

Duties/Specialized Training: _____

Previous Employment:

Please list your last three positions with the most recent being first.

Company Name: _____ Dates Worked: _____ - _____

Company Location: _____ Position: _____

Supervisor's Name: _____ Phone #: (_____) _____ - _____

Company Name: _____ Dates Worked: _____ - _____

Company Location: _____ Position: _____

Supervisor's Name: _____ Phone #: (_____) _____ - _____

Company Name: _____ Dates Worked: _____ - _____

Company Location: _____ Position: _____

Supervisor's Name: _____ Phone #: (_____) _____ - _____

Please list any other information pertinent to the position for which you're applying: _____

I hereby certify that the information contained in this employment application is true and correct and agree to have any of the statements verified. I understand that any misrepresentation, falsification, or omission of information on this application may result in my failure to receive employment, my immediate dismissal from employment, and/or possible legal action.

In consideration of my employment, I agree to conform to the policies and procedures of my employer and acknowledge and agree that my employment and compensation can be terminated at will, with or without cause and/or notice, at any time, either at my option or at the option of my employer. I also understand that this company is an Equal Opportunity Employer hiring candidates appropriate for the given position without regard to age (except where required by law), race, national origin, sex/gender, religion/creed, or any other characteristic of discriminatory nature.

This application must be completely filled out in order for it to be considered for employment. If the information provided on this application cannot be satisfactorily verified, the application could be considered as incomplete.

Applicant's Signature

Date of Signature