

GALLERIA DE PACO

Employment Application



Tell us About Yourself

Which position are you applying for?

Current Job Title

First Name

Last Name

Phone Number

E-mail Address

Street Address

City

State

Zip
Code

How long have you lived at your
current address?

Employment Desire

Are you employed now

if so, may we inquire of your present employer?

YES

NO

YES

NO

Where

When

Are you legally authorized to work in the U.S?

YES NO

Are you of legal age to serve alcohol at this time in this state?

YES NO

When can you start?

Salary Desired

If offered a position, how much notice do you need to offer your current employer?

Former Employers (List below last four employers, Starting with last one first.)

Date Month and Year

Name & Address of Employer

Salary

Position

Reason for Leaving

.....
Date Month and Year

Name & Address of Employer

Salary

Position

Reason for Leaving

.....
Date Month and Year

Name & Address of Employer

Salary

Position

Reason for Leaving

.....
Date Month and Year

Name & Address of Employer

Salary

Position

Reason for Leaving

Education History

High School (Name & Location of School)	Years attended	Did you graduate
		YES NO

College (Name & Location of School)	Years attended	Did you graduate
		YES NO

Trade, Business, or Correspondence School (Name & Location of School)	Years attended	Did you graduate
		YES NO

References (Give below the names of three persons not related to you. Whom you have known at least one year.)

1.First Name	Last Name	Address
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Business	E-mail Address
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2.First Name	Last Name	Address
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Business	E-mail Address
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3.First Name	Last Name	Address
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Business	E-mail Address
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I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Digital Signature

Date