

# 5801 Video Lounge & Café



| APPLICANT INFORMATION  |                     |                     |       |
|--|---------------------|---------------------|-------|
| Last Name:   | First:              | M.I.                | Date: |
| Chosen Name:   | Pronouns:           |                     |       |
| Street Address:  |                     | Apartment/Unit #:   |       |
| City:  | State:              | ZIP:                |       |
| Phone:   | E-mail Address:     |                     |       |
| Position Applied For:  | Desired Salary:     | Start Date:         |       |
| Are you a citizen of the United States?    YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>                   |                     |                     |       |
| Have you ever been convicted of a felony?    YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain:   |                     |                     |       |
| REFERENCES   |                     |                     |       |
| Full Name:   |                     | Relationship:       |       |
| Company:   |                     | Phone:              |       |
| Full Name:   |                     | Relationship:       |       |
| Company:   |                     | Phone:              |       |
| PREVIOUS EMPLOYMENT  |                     |                     |       |
| Company 1:   |                     | Phone:              |       |
| Address:   |                     | Supervisor:         |       |
| Job Title:   | Starting Salary \$: | Ending Salary \$:   |       |
| Responsibilities:  |                     |                     |       |
| From:  | To:                 | Reason for Leaving: |       |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>   |                     |                     |       |
| Company 2:   |                     | Phone:              |       |
| Address:   |                     | Supervisor:         |       |
| Job Title:   | Starting Salary \$: | Ending Salary \$:   |       |
| Responsibilities:  |                     |                     |       |
| From:  | To:                 | Reason for Leaving: |       |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>   |                     |                     |       |
| DISCLAIMER AND SIGNATURE   |                     |                     |       |
| 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 release. |                     |                     |       |
| Signature:   |                     |                     | Date: |