



Application For Employment

(Pre-Employment Questionnaire)

Position Applied For: _____

Date: _____

We are an equal opportunity employer, dedicated to a policy of non-discrimination. Employment is based upon qualification, without regard to race, sex, religion, marital status, color, age, or national origin and status with regard to public assistance. We will make every effort to place the handicapped in suitable positions.

PLEASE COMPLETE ALL INFORMATION EVEN IF INCLUDED IN YOUR RESUME. PLEASE TURN IN APPLICATION AT BRYANT LAKE BOWL ATTN: MO MOORE, 810 W LAKE ST, MPLS MN 55408.

PERSONAL DATA (Please type or print)

Last Name	First Name	Middle Initial	Age (If under 18:)
Home Phone	Mobile Phone	Email Address	
Present Address	Number/Street	City	State Zip
Permanent Address (If different)			
Other Name(s) by which applicant is known to references if different from present name:		Do you have any relatives working here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Name(s) and Relationship:	
Have you worked for any of the following? If so, write the dates next to each.		Salary Desired	Available Start Date
Café Wyrd		Please circle your availability	
Barbette		Full-time	Part-time Either
Bryant Lake Bowl		Please circle days and hours you are available for work	
Red Stag		M	Tu W Th F Sa Su
Gigi's Café		Mornings	Afternoons Evenings
Bread & Pickle		Are you authorized to work in the United States?	
Pat's Tap		(¿Es autorizado trabajar en Estados Unidos?)	
How did you hear of us and/or the job you are applying for? Explain		<input type="checkbox"/> Yes (Sí) <input type="checkbox"/> No	
Advertisement _____		If yes, proof of identity and employment eligibility will be required upon beginning employment. (Si sí, la prueba de elegibilidad de identidad y empleo será required a empezar empleo.)	
Person (who?) _____			
Other _____			
Within the last five (5) years have you been convicted of a felony? (¿Dentro del último cinco (5) años le tienen fue condenado de un crimen grave?) <input type="checkbox"/> Yes (Sí) <input type="checkbox"/> No If yes, briefly describe. (En caso afirmativo, describa brevemente.)			

EDUCATION: Education is a criterion that the company may utilize in determining whether or not an applicant is qualified.

Name and Location of School	Degree or Certification Received	Course of Study - Major/Minor Subjects	Years Attended
High School (or G.E.D)			
College or University			
Business/Trade/Tech School			
Military Service Schools			

Please account for all periods of employment. Start with your most recent position and include military service. You may attach a resume to supplement information, but application must be completed in full.

WORK EXPERIENCE

Name of Employer		Address		City	State	Zip
Date Started	Starting Earnings \$	Starting Position		Phone Number		
Date Ended	Present (Last) Earnings \$	Present (Last) Position		May we call you at this number? Yes No		
Name and Title of Present/Last Supervisor		May we contact this employer prior to any job offer? Yes No				
		Reason For Leaving				
Brief description of your responsibilities (including number of employees you supervised, if applicable)						

Name of Employer		Address		City	State	Zip
Date Started	Starting Earnings \$	Starting Position		Phone Number		
Date Ended	Ending Earnings \$	Ending Position		May we contact this employer? Yes No		
Name and Title of Supervisor		Reason For Leaving				
Brief description of your responsibilities (including number of employees you supervised, if applicable)						

Name of Employer		Address		City	State	Zip
Date Started	Starting Earnings \$	Starting Position		Phone Number		
Date Ended	Ending Earnings \$	Ending Position		May we contact this employer? Yes No		
Name and Title of Supervisor		Reason For Leaving				
Brief description of your responsibilities (including number of employees you supervised, if applicable)						

Name of Employer		Address		City	State	Zip
Date Started	Starting Earnings \$	Starting Position		Phone Number		
Date Ended	Ending Earnings \$	Ending Position		May we contact this employer? Yes No		
Name and Title of Supervisor		Reason For Leaving				
Brief description of your responsibilities (including number of employees you supervised, if applicable)						

Please tell us of any special talents, interests, hobbies, or anything you would like us to know. Please include anything that might relate to the position you are applying for.

BUSINESS REFERENCES

Name	Phone	Email	Relation
Name	Phone	Email	Relation
Name	Phone	Email	Relation
Name	Phone	Email	Relation

APPLICANT: Please read carefully and sign

I affirm that the information provided is true and complete and that I have not withheld any fact(s). Any misrepresentation, falsification, omission or derogatory information that is discovered may prevent my being hired, or if hired, may subject me to disciplinary action, up to and including immediate employment dismissal.

I authorize the Tiny Diner, LLC. company or its agents to conduct an investigation and verification of all statements and information contained in this application that they may deem relevant to evaluating my qualifications for employment. I authorize all my previous employers or other persons having information concerning me or my record of employment to report such information. I release each such person, employer or its agents from all claims and liability whatsoever arising out of such an investigation and disclosure of my background.

I have read, understand and agree to the above.

Authorized Signature of Applicant

Date

SOLICITANTE: Lea por favor con cuidado y firme

Afirmo que la información proporcionada es verdad y completo y que yo no he retenido ningún hecho (hechos). Cualquier tergiversación, la falsificación, la omisión o información despectiva que es descubierto puede prevenir mi ser empleado, o si empleado, me puede sujetar a la acción disciplinaria, hasta e inclusive despido inmediato de empleo

Autorizo la compañía de Tiny Diner, LLC. o a sus agentes a realizar una investigación y la comprobación de todas declaraciones y la información contenidas en esta aplicación que ellos pueden creer pertinente a evaluar mis requisitos para el empleo. Autorizo todos mis empleadores anteriores o a otras personas que tienen información con respecto a mí o con respecto a mi registro de empleo para informar tal información. Suelto a cada tal persona, el empleador o sus agentes de todos reclamos y la obligación que todo lo que surgiendo fuera de tal investigación y revelación de mi fondo.

He leído, he comprendido y he aceptado el arriba.

La firma de la autorización de solicitante

Fecha