## MICHAEL'S RESTAURANT

## APPLICATION FOR EMPLOYMENT FORM

www.michaelsofstockbridge.com

Please Print Clearly

Name:	Date:
Address:	City:
State: Zip Code:Phone:	Cell#
Date of Birth: Age	<u>—</u>
E-mail Address:	
Position Desired - Please Answer All Questions.	
Position applying for:	Desired Hourly Wage (Cooks Only) Start Date:
Full or Part Time:	Days you can NOT work (Circle) M T W TH F S S
Do You Have Reliable Transportation: Do you have experience in the job you are applying for	
Are You Employed Presently?If So Whe	ere?will you be leaving your present job
Will You Be Leaving for School or any other reason? If So When?	
FORMER EMPLOYMENT	
Please put all previous employment on the back page.	
Date Employed From: To:	Your Position:
Name of Establishment:	
Manager/Contact Person:	Phone: ( )
Reason for Leaving:	

## PLEASE PUT ANY ADDITIONAL INFORMATION ON BACK SIDE OF PAGE INCLUDING FORMER EMPLOYMENT OR REFFERENCES!

**Michael's** is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

I, authorize investigation of all statements contained in this application. I understand that misrepresentation of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.