



APPLICATION FOR EMPLOYMENT

Boulder Tap House

DATE:

Personal Information

NAME			
ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER		EMAIL ADDRESS	

Employment Desired

POSITION	DATE YOU CAN START	WAGE DESIRED
ARE YOU CURRENTLY EMPLOYED? YES / NO IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES / NO		

Availability

CHECK ALL THAT APPLY:	DAYS	NIGHTS	WEEKENDS	DESIRED HOURS PER WEEK
	8am-4pm	4pm-CLOSE		
	Mon Tue Wed Thu Fri Sat Sun			

IS THERE ANY TIME DURING THE YEAR YOU WOULD NOT BE AVAILABLE? **YES / NO** IF YES, PLEASE EXPLAIN:

Education History

	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE/TECH SCHOOL				

General Information

U.S. MILITARY SERVICE	BRANCH:	RANK:
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Previous Employment

DATE: MONTH & YEAR	NAME, CITY & STATE OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM			
TO			
FROM			
TO			

Additional Skills/Experience

Authorization

I certify the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company for all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or make any arrangement contrary to the foregoing unless it is in writing and signed by an authorized company representative.

APPLICANT SIGNATURE:	DATE:
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