

# WINGS-BREW, INC.

Steve's Dakota Grill • Brown Derby Road House • Raging Rhino

## EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. All applicants & employees are considered for employment, development, advancement & compensation based upon their skills and performance, without regard to race, color, religion, sex, national origin, age or handicap.

### PERSONAL DATA

NAME		SOCIAL SECURITY NUMBER		HOME PHONE NUMBER	
ADDRESS		CITY		STATE	ZIP
POSITION DESIRED		SALARY DESIRED	DATE AVAILABLE	TRAVEL ? _____	
				RELOCATE ? _____	
TYPE OF EMPLOYMENT... ____ FULL    ____ PART TIME NUMBER OF HOURS _____		TELL US WHEN YOU CAN WORK... SUN _____ AM / PM                      THUR _____ AM / PM MON _____ AM / PM                      FRI _____ AM / PM TUES _____ AM / PM                      SAT _____ AM / PM WED _____ AM / PM			
HOW DID YOU HEAR ABOUT US ? NEWSPAPER _____ AGENCY _____ OTHER _____		HAVE YOU EVER WORKED FOR THE TSAVARIS CORPORATION ? YES _____ WHERE _____ NO _____			
ARE YOU A U.S. CITIZEN ?    ____ YES    ____ NO IF "NO" ARE YOU ELIGIBLE TO HOLD PERMANENT EMPLOYMENT IN THE U.S. ?                      ____ YES    ____ NO		ARE YOU A VETERAN OF THE U.S. MILITARY ? ____ NO    ____ YES / BRANCH _____ DATE ENTERED _____ DISCHARGE DATE _____ HIGHEST RANK _____			
DO YOU HAVE ANY DISABILITIES WHICH YOU WOULD NEED ACCOMODATIONS IN ORDER TO PERFORM THE DUTIES OF YOUR JOB ?    ____ NO    ____ YES / PLEASE EXPLAIN _____					
DO YOU HAVE ANY RELATIVES THAT WORK FOR THE TSAVARIS CORPORATION ? ____ NO    ____ YES / WHERE ? _____					
ARE YOU AT LEAST 18 YEARS OLD ? ____ YES ____ NO / BIRTHDATE _____		HAVE YOU EVER BEEN CONVICTED OF A CRIME ? ____ YES ____ NO (THIS WILL NOT, NECESSARILY, BAR YOU FROM EMPLOYMENT) IF "YES" PLEASE EXPLAIN OFFENSE & DISPOSITION _____ _____			
IS THERE ANY INFORMATION RELATIVE TO CHANGE OF NAME, USE OF AN ASSUMED NAME (S) OR NICKNAME (S) NECESSARY TO ENABLE A CHECK ON YOUR BACKGROUND ? ____ NO    ____ YES / PLEASE EXPLAIN _____					

**WINGS-BREW, INC.**  
 EMPLOYMENT APPLICATION  
 (CONTINUED)

**EDUCATION**

SCHOOL NAME & ADDRESS	MAJOR AREA OF STUDY	YEARS ATTENDED	GRADUATION DATE	DEGREE

**EMPLOYMENT HISTORY**

NAME OF COMPANY \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
 POSITION \_\_\_\_\_ SALARY: \$ \_\_\_\_\_ START \$ \_\_\_\_\_ END  
 SUPERVISORS NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ CAN WE CONTACT ? \_\_\_ YES \_\_\_ NO  
 RESPONSIBILITIES \_\_\_\_\_

NAME OF COMPANY \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
 POSITION \_\_\_\_\_ SALARY: \$ \_\_\_\_\_ START \$ \_\_\_\_\_ END  
 SUPERVISORS NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ CAN WE CONTACT ? \_\_\_ YES \_\_\_ NO  
 RESPONSIBILITIES \_\_\_\_\_

NAME OF COMPANY \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
 POSITION \_\_\_\_\_ SALARY: \$ \_\_\_\_\_ START \$ \_\_\_\_\_ END  
 SUPERVISORS NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ CAN WE CONTACT ? \_\_\_ YES \_\_\_ NO  
 RESPONSIBILITIES \_\_\_\_\_

**REFERENCES**

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP

**STATEMENT OF ACCURACY**

(REVISED 3/99)

I authorize any person, firm, corporation or other entity to furnish any information requested by the WINGS-BREW, INC. or its agents, "Reference Checks" relative to my character, police or criminal record, employment history, educational credentials or credit history. I further release and discharge any party delivering information pursuant to his authorization from any liability, claims, charges or causes of action which I may have as a result of the delivery or disclosure of any information requested by this employer. I certify that all the statements of this application for employment are true and complete, and I understand that any false, misleading or omitted statements shall be considered sufficient cause for my immediate discharge, if employed. Further, I understand that this employment application and any other company documents or statements made should not be construed as direct, implied or inferred contracts of employment between myself and this employer, and that, if employed, my employment is for no definite period and that my employment and compensation can be terminated, with or without, just cause or without notice at any time, at the option of either myself or the employer.

APPLICANTS SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

