



Employment Application – WALLABY’S BAR AND GRILLE

Please deliver completed application in person or email to wallabys@wallabysbarandgrille.com

EMPLOYEE INFORMATION

Name: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Current Phone Number: _____

Email Address: _____

Permanent Address _____ City: _____ State: _____ Zip: _____

(Such as: Parent’s address in case you move, etc.)

EMPLOYEE AVAILABILITY

Please list your hours of Availability

MONDAY:

TUESDAY:

WEDNESDAY:

THURSDAY:

FRIDAY:

SATURDAY:

SUNDAY:

Are you looking for Full Time or Part Time hours? _____

If necessary for the job, are you older than 18? _____

Are you currently employed: _____ If Yes, where?: _____

EMPLOYMENT DESIRED

Position: _____ Date you can start: _____

Referred By: _____

How did you hear about Wallaby’s?: _____

EDUCATION (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8

Name of School: _____

Location: _____

Secondary 9 10 11 12 GED

Name of School: _____

Location: _____

College: 1 2 3 4 5 6 7 8

Name of School: _____

Location: _____

WORK HISTORY

1. Company: _____ Phone No. _____
Address: _____ City/State/Zip _____
Dates of Employment: From _____ To: _____ Salary: Beginning _____ Ending _____
Job Title: _____ Supervisor: _____
Describe duties: _____
Reason for leaving: _____

2. Company: _____ Phone No. _____
Address: _____ City/State/Zip _____
Dates of Employment: From _____ To: _____ Salary: Beginning _____ Ending _____
Job Title: _____ Supervisor: _____
Describe duties: _____
Reason for leaving: _____

3. Company: _____ Phone No. _____
Address: _____ City/State/Zip _____
Dates of Employment: From _____ To: _____ Salary: Beginning _____ Ending _____
Job Title: _____ Supervisor: _____
Describe duties: _____
Reason for leaving: _____

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature: _____ Date: _____

Name (please print) _____