

**Employment Application Form** (Please print and complete all sections, then fax it to 718-459-1812 or bring it in to the restaurant)

# **Application Information**

Name (Last, First)			
Home Phone:	Cell:		
Street Address:			
City, State, Zip Code:			
Are you eligible to work in the United States?		□ Yes	🗆 No
Position(s) applying for:			

# **Days/Hours Available**

□ Monday:	Hours Available:	from	to
Tuesday:	Hours Available:	from	_to
U Wednesday:	Hours Available:	from	_to
□ Thursday:	Hours Available:	from	_to
Garage Friday:	Hours Available:	from	_to
□ Saturday:	Hours Available:	from	_to
□ Sunday:	Hours Available:	from	_to
Date you can start?/ (MM/DD/YYYY) Desired Salary \$			

#### **Personal Information:**

Have you ever applied to or worked for Tower Diner?	□Yes	□No
If yes, please explain (include date[s]):		
Do you have any friends, relatives, or acquaintances working for Tower?	□Yes	□No
If yes, state name & relationship:		

### **Education, Training and Experience**

For each level of schooling, please give the school name, the city and state, your major and minor subjects, the degree, and year it was received.
High School:
College or University:
Other:
Employment History
Are you currently employed?
If you are currently employed, may we contact your current employer? $\Box$ Yes $\Box$ No
Please describe your two most recent employment positions. If you have a resume, please attach it to this application.
Name of Employer:
Name of Supervisor and Telephone Number:
Address:
Length of Employment (Include Dates):
Position & Duties:
Reason for Leaving:
Name of Employer:
Name of Supervisor and Telephone Number:
Address:
Length of Employment (Include Dates):
Position & Duties:
Reason for Leaving:
May we contact this employer for references? $\Box$ Yes $\Box$ No

## We Are an Equal Opportunity Employer

Tower Diner is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of Tower Diner.

### References

Please list two persons who have knowledge of your current/recent work performance.

Name: (First, Last):	 	
Telephone Number:		
Years Acquainted:		
Name: (First, Last):	 	
Telephone Number:	 	
Years Acquainted:		

# Certification

I certify that I have not knowingly withheld any information that might affect my chances for hiring. I attest to the fact that the answers given by me are true and correct to the best of my knowledge and ability. I understand that any omission (including any false statements) of material fact on this application or on any document used to secure this employment can be grounds for rejection of my application or, if I am employed by Tower Diner, can be terms for my immediate termination. (Initial)

I understand that if I am hired, I will be an employee "at-will" and thus my employment can be terminated at any time either with or without prior notice, and either me or Tower. (Initial)

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Applicant's Signature: Date

FOR COMPANY LICE ONLY.	
FOR COMPANY USE ONLY:	
Received by:	Date:
Interviewer:	Date: