

DOCKSIDE RESTAURANT & BAR

Application for Employment

PLEASE TYPE OR PRINT. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Circle Location Applying For:			
Malden	Riverview	Wakefield	Chelsea
Position Applying For:			
<input type="checkbox"/> Food Server	<input type="checkbox"/> Bartender	<input type="checkbox"/> Line Cook/Food Prep	<input type="checkbox"/> Dish Washer <input type="checkbox"/> Take Out
<input type="checkbox"/> Keno	<input type="checkbox"/> Security	<input type="checkbox"/> Delivery Driver	<input type="checkbox"/> Manager <input type="checkbox"/> Host
Name (Last, First, Middle):		Street Address:	City, State & Zip:
Social Security Number:	Home Phone:	Work Phone:	Other Phone:

Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a Felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, please explain:	
Have you ever been employed by Dockside Restaurants?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, which Location and When?	
Are you related to any current Dockside employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, their name & their relationship to you?	
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, State of issuance, license #, and expiration date:	

EDUCATION

Name of School	Did you graduate?	If No, # of years Completed	Degree received	Major
High School or GED:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other School:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
College:	<input type="checkbox"/> Yes <input type="checkbox"/> No			

PLEASE CHECK THE SHIFTS YOU ARE AVAILABLE TO WORK (HOURS MAY VARY)

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
LUNCH							
DINNER							

REFERENCES: Please list three References

Name:	Phone:	Relationship:
Name:	Phone:	Relationship:
Name:	Phone:	Relationship:

WORK EXPERIENCE

Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation "See Resume."

PLEASE NOTE: Dockside Restaurants reserves the right to contact all current and former employers for reference information.

Organization Name and Address:			
Last Rate of Pay:	Dates Employed From: To:	Eligible for Re-Hire? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact my current references: <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Name & Title			Phone #:
Primary duties:		Reason for Leaving:	

Organization Name and Address:			
Last Rate of Pay:	Dates Employed From: To:	Eligible for Re-Hire? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact my current references: <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Name & Title			Phone #:
Primary duties:		Reason for Leaving:	

Organization Name and Address:			
Last Rate of Pay:	Dates Employed From: To:	Eligible for Re-Hire? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact my current references: <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Name & Title			Phone #:
Primary duties:		Reason for Leaving:	

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

"I understand the Age Discrimination in Employment Act, prohibits discrimination on the basis of age, with respect to individuals who are at least 40 years age"

"I certify that 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 you to investigate all statements contained herein and the references 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 all parties from all liability for any damage that may result from furnishing the same to you."

"I understand and agree that, if hired, my employment is for no definite period and any, regardless of the date of payment of my wages and salary, am terminated at any time without notice."

"I understand that the company has in place a dispute resolution procedure, and I further acknowledge and agree that if I am offered and accept employment, any dispute between me and the company relating to my employment and/or separation from employment, shall be summited with in (1) year of the day which I learned of the event and shall be resolved pursuant to terms and conditions of the dispute resolution procedure."

Applicant Signature: _____

Date: _____