



APPLICATION FOR EMPLOYMENT

K&W Cafeterias, Inc. is an equal opportunity employer and does not discriminate in employment or hiring on the basis of race, color, national origin, sex, religion, disability, age or veteran status.

INSTRUCTIONS: Please print and answer all questions. If a question does not apply to you, answer with "No" or "Not Applicable" (N/A).

PERSONAL INFORMATION:

Name _____ Social Security Number _____
First Middle Last

Present Address _____

Home Phone _____ Business Phone _____

Are you under 18 years of age? Yes No

Are you legally eligible for employment in the U.S.? Yes No

Have you ever worked for K&W Cafeterias? Yes No If yes, where? _____ When? _____

Have you ever been employed under another name? Yes No If yes, please provide:
Former Name _____ Employer _____

K&W Position Applying For _____ Minimum Salary Requirement _____

Date you can Start _____ Referred By _____

Are you available and willing to work nights? Yes No Saturdays? Yes No Sundays? Yes No

Are you interested in working Part Time Full Time Temporary

Driver's License Number (if required by job) _____ State _____

EDUCATION:

	Name and Location of School	Years Attended	Date Graduated	Degree
High School				
College				
Trade, Business, or Correspondence School				
Other				

FORMER EMPLOYERS: Start with your current or last position.

Employer: _____ Address: _____
Phone: _____ Dates Employed: _____ Position/Job Title: _____
Salary: _____ Reason for Leaving: _____
Summarize job duties: _____
Supervisor's Name: _____ May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer: _____ Address: _____
Phone: _____ Dates Employed: _____ Position/Job Title: _____
Salary: _____ Reason for Leaving: _____
Summarize job duties: _____
Supervisor's Name: _____ May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer: _____ Address: _____
Phone: _____ Dates Employed: _____ Position/Job Title: _____
Salary: _____ Reason for Leaving: _____
Summarize job duties: _____
Supervisor's Name: _____ May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer: _____ Address: _____
Phone: _____ Dates Employed: _____ Position/Job Title: _____
Salary: _____ Reason for Leaving: _____
Summarize job duties: _____
Supervisor's Name: _____ May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT'S STATEMENT:

I certify that all statements made on this application are true and correct to the best of my knowledge. I understand and agree that misrepresentation or omission of facts called for may result in termination of my candidacy for employment, or if discovered after employment, may result in termination of employment. I further understand that this application shall remain active for 30 days after which it will become inactive unless written re-application is made.

APPLICANT'S SIGNATURE _____ DATE _____

AUTHORIZATION TO CONTACT REFERENCES:

I authorize K & W Cafeterias, Inc. and its representatives to inquire of all former employers, schools and references. I further authorize my current and former employers, schools, and references to disclose information to K & W Cafeterias, Inc. upon request. I hereby release and hold harmless my current and former employers, schools and references who have provided information in connection with my application for employment.

APPLICANT'S SIGNATURE _____ DATE _____