

# THE CAROLINA TAVERN

Hourly Employment Application



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	Expected Hourly Pay Rate		
Position Applied for			
Full Time / Part Time    Do you have reliable transportation to and from work during our hours of operation?			
Are you a citizen of the United States?    YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you of legal age to serve alcohol?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
The Carolina Tavern does not tolerate drug use before or during work. Are you willing to comply?			
We have specific requirements for personal appearance for both the dining room and kitchen: clean, proper work apparel, and good general hygiene. Are you willing to comply?			
When would you be available to start?			
Please indicate any days that you are not available.			
If hired, what notice would you need to give your current employer?			

EDUCATION			
High School		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

<b>PREVIOUS EMPLOYMENT</b>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

<b>MILITARY SERVICE</b>	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

<b>DISCLAIMER AND SIGNATURE</b>	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date