

Application For Employment

An Equal Opportunity Employer

LOVICK'S CAFE, INC.

(252) 523-6854
Kinston, North Carolina
Faison, North Carolina

PERSONAL (Please Print)

Name: _____ Date: _____
Last First Middle Initial

Address: _____
No. Street City State Zip Code

Telephone: (____) _____ - _____ Social Security Number: _____

If you are under 18 years of age, could you furnish a work permit? Yes No

Are you legally eligible for employment in this country?..... Yes No

(Proof of U.S. Citizenship or immigration status will be required upon employment.)

RESTAURANT EXPERIENCE: (Please check any prior restaurant experience)

- Management Bartender Cook Chef
- Waiter/tress Host/Hostess Bus/Dishwasher Deliveries
- Cashier Catering Banquets Bookkeeping
- Other (Please Specify): _____

Position(s) applying for: _____

- Have you ever been employed by this restaurant before?..... Yes No
- Are you currently employed?..... Yes No Date Available: _____
- May we contact your current employer?..... Yes No _____
- If a position requires travel, do you have a valid driver's license?..... Yes No Salary Desired: _____
- Have you ever been convicted of a felony in the last seven (7) years? Yes No _____

(Conviction will not automatically disqualify an applicant from employment.)

If yes, please explain:

List any special skills, experiences, or qualifications which may benefit you in the job for which you are applying:

AVAILABILITY – List hours available to work per week:

| Monday | | Tuesday | | Wednesday | | Thursday | | Friday | | Saturday | | Sunday | | <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time |
|--------|----|---------|----|-----------|----|----------|----|--------|----|----------|----|--------|----|--|
| From | To | From | To | From | To | From | To | From | To | From | To | From | To | |
| | | | | | | | | | | | | | | |

| EDUCATIONAL BACKGROUND | School Name and Address | Years Completed | Diploma/Degree | Subjects Studied |
|------------------------|-------------------------|-----------------|----------------|------------------|
| High School | | | | |
| College | | | | |
| Graduate School | | | | |
| Trade/Business School | | | | |

EMPLOYMENT HISTORY: (List the last 3 employers, starting with the last one first. Include any volunteer activities or military experience)

| | | | |
|---------------------------------|-----|--|---|
| 1. Name and Address of Employer | | | Telephone: |
| From: | To: | Job Title: | Supervisor: |
| Describe Major Duties: | | | |
| Reason for Leaving: | | Starting Salary: \$ Per: | Final Salary: \$ Per: |

| | | | |
|---------------------------------|-----|--|---|
| 2. Name and Address of Employer | | | Telephone: |
| From: | To: | Job Title: | Supervisor: |
| Describe Major Duties: | | | |
| Reason for Leaving: | | Starting Salary: \$ Per: | Final Salary: \$ Per: |

| | | | |
|---------------------------------|-----|--|---|
| 3. Name and Address of Employer | | | Telephone: |
| From: | To: | Job Title: | Supervisor: |
| Describe Major Duties: | | | |
| Reason for Leaving: | | Starting Salary: \$ Per: | Final Salary: \$ Per: |

REFERENCES: (List the names of three persons, not related to you, who have known you for at least two years)

| NAME | ADDRESS | OCCUPATION | PHONE # |
|------|---------|------------|---------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

PRE-EMPLOYMENT STATEMENT:

“I certify that all the information submitted by me on this application form is true and complete. I authorize investigation of all statements contained on this application form and permit this organization to obtain any transcripts, records, or documents pertaining to my education, background, or business experience. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected or if I am employed, my employment may be terminated at any time. If any employment relationship is established, I understand that I retain the right to terminate my employment at any time and that this organization retains the same right. I also understand that my terms of employment can be changed at any time, with or without cause or notice, by this organization. I also understand that I am required to abide by all rules and regulations of this employer.”

SIGNATURE:

DATE:

| | | | |
|---|--------------------|--|--|
| FOR EMPLOYER USE ONLY – APPLICANT DO NOT WRITE IN THIS SECTION | | | |
| Interviewed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Interviewer: _____ | Date: _____ | |
| Remarks/Notes: | | | |
| Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Job Title: _____ | | |
| Employment Date: _____ | Rate of Pay: _____ | Job Status: <input type="checkbox"/> F.T <input type="checkbox"/> P.T <input type="checkbox"/> Reg. <input type="checkbox"/> Temp. | |
| Hiring Supervisor: _____ | Date: _____ | | |