ALPINE ART CENTER WEDDINGS ~ EVENTS ~ RECEPTIONS

APPLICATION FOR EMPLOYMENT

Applicants will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status. DO NOT answer any question that you feel might be used to discriminate against you for any reason prohibited by law.

PERSONAL INFORMATION

Last Name:	First:		Middle:	
Street:				
City:	_ State:		Zip:	
Home Telephone:		Cell Phone:_		
How did you hear about the Alpine Art Center?				
Names of friends or relatives employed at this company				
Are you under the age of 18?	Yes	No	If yes, state age:	
WORK PREFERENCE				

Position Desired (select the ones desired)						
Dishwasher	Event Staff	Food P	reparation	Gardening		
Full Time	Part Time	Desired Hou	rly Wage \$		_	
If hired, on what date would you be available to begin work?						
Will you work long hours when necessary?		Yes	No			
Will you work nights and weekends?		Yes	No			

GENERAL DATA

If yes, please explain:

Can you provide proof of US citizenship or authorization to b	pe employe	d in the United States?	Yes	No
Have you ever been convicted of a crime in the past ten yea	rs, excludir	ng misdemeanors and sun	nmary offe	enses, which
has not been annulled, expunged or sealed by a court?	Yes	No		

Do you have any physical conditions, which might limit your ability to perform the job for which you are applying?

No If yes, describe this condition and how you feel you can perform the job you are applying for: Yes

EDUCATION AND TRAINING

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Are you attending High School? Yes No If yes, se	elect highest grade COMPLETED: 9 10 11				
College/University: Ma	ajor/Minor:				
Years Completed: Degree:					
Describe any of your personal characteristics that are	associated with social skills:				
Describe simply any prior experience you have to cate	ering and/or food preparation if any:				
EMPLOYMENT HISTORY					
Would you allow us to contact the employer listed be	ow? Yes No				
COMPANY NAME	Name & Phone Number of Supervisor:				
Address	When were you employed (month and year) Start (/)				
What were your main duties?	Why did you leave?				
Would you allow us to contact the employer listed be	low? Yes No				
COMPANY NAME	Name & Phone Number of Supervisor:				
Address	When were you employed (month and year)				
	Start (/) End (/)				
What were your main duties?	Why did you leave?				
MISCELLANEOUS					

Do you have a current food handler's permit? Yes No

Are you willing to get your food handler's permit (required for all event staff, food preparation staff) Yes No

CERTIFICATE OF APPLICANT (read carefully before signing): The information on this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I hereby authorize any former employer, person, firm or corporation listed hereon, including his company, to answer any and all questions about my prior employment and agree to hold all persons harmless for giving any and all information within their knowledge or records. I am subject to a **90-day** introduction period. My employment may be terminated, at any time, at the option of myself or the company, regardless of the length of time I am employed prior to termination. I understand that no management representative has any authority to make any agreement contrary to the foregoing or to enter into any agreement to employ me for any specific length of time.

Signature or name of Applicant: _____

Date: ____