

# THE RODEO GRILL

AN EQUAL OPPORTUNITY EMPLOYER  
APPLICATION FOR EMPLOYMENT

In order for you to be considered for employment, this application must be filled out in its ENTIRETY. Resumes, though certainly welcome, should not be submitted in lieu of information requested below.

## GENERAL

PLEASE PRINT

Date: \_\_\_\_\_  
Month Date Year

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
First Middle Last

Present Address: \_\_\_\_\_  
(If less than 2 year's at current address) Street City State Zip

Previous Address: \_\_\_\_\_  
Street City State Zip

Age Birth Date Day Phone: ( )  
If Under 21: If Under 21: Evening Phone: ( )  
Month Day Year If none, give contact number.

Are you legally able to work in the United States?  Yes  No (Proof of identity and legal authority to work in the U.S. is a condition of employment.)

For what position are you applying? (SPECIFIC POSITION MUST BE LISTED FOR THIS APPLICATION TO BE CONSIDERED.)  
 Server  Host  Bartender  Busser  Cashier Expected Starting Hourly Rate:  
 Line Cook  Dishwasher  Prep cook Expected Weekly Earnings:

Who referred you to The Rodeo Grill? \_\_\_\_\_ Date available for employment: \_\_\_\_\_

Are you presently or have you ever been employed by The Rodeo Grill? Yes  No

Location: \_\_\_\_\_ Dates: \_\_\_\_\_

Tell us why you want to work here: \_\_\_\_\_

What is your favorite aspect of the service industry? \_\_\_\_\_

Have you ever been convicted of a felony which has not been annulled or sealed by a court? Yes  No  If yes, please explain above:  
(Convictions will not necessarily exclude you from employment, but date and type of conviction may be considered for job placement.)

Relatives Employed by The Rodeo Grill:

Name Location Relationship

Name Location Relationship

(Relatives employed by the company will not necessarily exclude you from employment but will be considered for job placement to avoid a direct supervisory relationship between relatives.)

## WORK SCHEDULE AVAILABILITY

What shifts/hours are you available to work? We have shifts from 10:00 AM to 10:00 PM. (Please list hours in each AM/PM box).

SHIFT	MON	TUES	WED	THUR	FRI	SAT	SUN
AM	to	to	to	to	to	to	to
PM	to	to	to	to	to	to	to

Are you willing to work a split shift? Yes  No  Are you willing to stay late in an emergency? Yes  No

Are you willing to work holidays / weekends? Yes  No  How many hours per week do you expect to work? \_\_\_\_\_

Are you willing to work at another location? Yes  No

## EDUCATION

Type of School	Name of School	Location of School	Course Majored in	Last Year Completed	Diploma	GPA
High School				9 10 11 12	Diploma	GPA
College / Other				1 2 3 4	Degree	GPA

## VOLUNTEER & MILITARY EXPERIENCE

Volunteer Experience: (Exclude activities relating to race, religion, color, ancestry, age, national origin, gender or disability.): \_\_\_\_\_

Skills Acquired: \_\_\_\_\_

U.S. Military Experience: (If applicable): \_\_\_\_\_ Skills Acquired: \_\_\_\_\_

**BUSINESS EXPERIENCE (List most recent three employers)**

Present Employer (or most recent)	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Salary		Reason For Leaving	
City State Zip					
Present Employer (or most recent)	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Salary		Reason For Leaving	
City State Zip					
Present Employer (or most recent)	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Salary		Reason For Leaving	
City State Zip					

**REFERENCES**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Yrs Known: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Yrs Known: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Yrs Known: \_\_\_\_\_

**NOTICE TO TIPPED EMPLOYEES:** You are hereby notified that Section 3(m) of the Fair Labor Standards Act (The Federal Minimum Wage Law) provides as follows: In determining the wage of a tipped employee, the amount paid such employee shall be at least an amount equal to the cash wage of \$2.13 an hour and an additional amount of the tips received by such employee which amount is equal to the difference between \$2.13 an hour and the current minimum wage in effect. The additional amount on account of tips may not exceed the value of the tips actually received by an employee. The preceding two sentences shall not apply with respect to any tipped employee unless such employee has been informed by the employer of the provisions of the section and all tips received by such employee have been retained by the employee, except that nothing herein shall prohibit the pooling of tips among employees who customarily and regularly receive tips. Some states have eliminated the tip credit or require a lower percentage of the tip credit than the Federal Minimum Wage Law, in which case State Law will apply.

I AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE. ANY MISREPRESENTATION, FALSE STATEMENT, OR OMISSION OF FACTS CALLED FOR SHALL BE GROUNDS FOR REFUSAL OF EMPLOYMENT OR IF HIRED, DISMISSAL FROM EMPLOYMENT.

AS A CONDITION OF RODEO GRILL LLC, d.b.a. THE RODEO GRILL CONSIDERATION OF MY EMPLOYMENT APPLICATION, I GIVE PERMISSION TO RODEO GRILL LLC, d.b.a. THE RODEO GRILL TO INVESTIGATE MY PERSONAL AND EMPLOYMENT HISTORY. I UNDERSTAND THAT THIS BACKGROUND INVESTIGATION WILL INCLUDE, BUT NOT BE LIMITED TO, VERIFICATION OF ALL THE ABOVE LISTED INFORMATION.

IT IS THE POLICY OF RODEO GRILL LLC, d.b.a. THE RODEO GRILL TO HIRE ONLY U.S. CITIZENS AND ALIENS WHO ARE LAWFULLY AUTHORIZED TO WORK IN THE UNITED STATES. ALL EMPLOYEES WILL BE ASKED TO VERIFY EMPLOYMENT ELIGIBILITY PRIOR TO BEGINNING WORK.

DATE: \_\_\_\_\_ SIGNATURE OF APPLICANT: \_\_\_\_\_

I UNDERSTAND THAT MY APPLICATION WILL REMAIN ACTIVE FOR 30 DAYS FROM THE DATE RECEIVED.

Interviewed By: \_\_\_\_\_ Date: \_\_\_\_\_