## Randy's Ice House, Inc. – The IceHouse Kitchen & Tavern Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

DDI IG LEVON FOR EN IDI OVI IENTE	

## APPLICATION FOR EMPLOYMENT

## APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE ALL PAGES.		DATE				
Name						
Last	First	Middle		Maiden		
Present address						
	Number	Street	City St	ate Zip		
How long at this addre	ess	Social Security No				
Telephone Hm ()						
Telephone Cell ()		]	Date of Birt	th : /	1	
If under 18, please list	age					
			Days/hou	rs available to wor	rk	
Position applied for Bartender - Waitstaff - Dishwasher		No Pref Thur _				
		rStaff – Busser-Manager		Fri		
(May circle more than	one) \$	/ <u>HK</u>	Tue Wed	Sat Sun	<del></del>	
How many hours can	you work weekly?		_ Can you	work nights/week	ends?	
		ONLY PART-TIMI	E ONLY	□FULL- OR PA	RT-TIME	
Employment desired When available for wo			E ONLY	□FULL- OR PAI	RT-TIME	
When available for wo			E ONLY	□FULL- OR PAI	RT-TIME	
When available for wo	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL	ork?		NUMB			
When available for wo	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for we EMAIL ADDRESS:  TYPE OF SCHOOL	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College  Bus. or Trade School	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College  Bus. or Trade	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College  Bus. or Trade School	NAME OF	LOCATION	NUMB	ER OF YEARS	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College  Bus. or Trade School  Professional School	NAME OF SCHOOL	LOCATION (City, State)	NUMB	ER OF YEARS PLETED	MAJOR &	
When available for wo EMAIL ADDRESS:  TYPE OF SCHOOL  High School  College  Bus, or Trade School  Professional School  HAVE YOU EVER B	NAME OF SCHOOL  EEN CONVICTEI	LOCATION	NUMB	ER OF YEARS LETED	MAJOR & DEGREE	

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT							
DO YOU HAVE A DRIVER'S LICENSE? What is your means of transportation to work?	Yes 🗖 No						
Driver's license number State of issu	ue	rator 🗖 Commerc	cial (CDL)				
Expiration date							
Work Experience  Please list your work experience for the past three (3) years beginning with your most recent job held.  If you were self-employed, give firm name. Attach additional sheets if necessary.							
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary				
City, State, Zip Code Phone number		From	Start				
I none number		То	Final				
	Your last job titl	e					
List the jobs you held, duties performed, skills used or company.	learned, advancement	s or promotions whi	e you worked at this				
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary				
City, State, Zip Code Phone number		From	Start				
I none number		То	Final				
	Your Last Job T	Your Last Job Title					
Reason for leaving (be specific)							
List the jobs you held, duties performed, skills used or company.	learned, advancement	s or promotions whi	e you worked at this				