



EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer

Thank you for your interest in working at BKW. We believe that we have an exciting concept, both for our customers and our employees. We are looking for the right individuals to add to our team, who are reliable and professional, friendly and courteous, and can bring passion and energy to the restaurant.

Please fill out this application in legible, block letters using a black or blue pen. If you have any questions about this application, job duties or opportunities, please ask the hiring manager. Mail or deliver the completed application to us at:

BKW™ of _____

Address: _____

ABOUT YOU			
Name (First, Middle, Last)		Social Security Number	Age (or "under 18", "over 21", etc.)
Street Address		City, State, Zip	
Email Address		Aliases Used:	
Home Phone ()	Cell Phone ()	Emergency Contact Name	Emergency Contact Phone ()
Are you over age 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any conditions that may prevent you from handling food or equipment in a sanitary and healthy fashion? If yes, please describe: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you over age 21?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>Here's the fun part. Write a little blurb about yourself and why you think you're a perfect fit for joining our team at BKW! Maybe you have a hobby or weird talent that's worth bragging about?</p> <div style="border: 2px solid red; border-radius: 20px; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><i>I'm awesome because:</i></p> </div>	
Are you legally allowed to work in the USA?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you love wings? (Hint, answer yes)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have restaurant experience? If yes, please describe:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a felony or dishonest or violent crime, or Sexual Abuse, Sexual Harassment or Neglect? If yes, please describe:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have any criminal or civil litigation pending or have you had any legal actions filed against you/been party to a legal filing? (If yes, please describe:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever declared personal bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Work Summary
Give us a brief summary of your work experience

AVAILABILITY

Position Desired (cook, server, hostess, manager, bartender, or just put "any")	Type of Position (circle one)	
Date you can start	Part Time	Full-Time
Have you applied here before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when:
Have you worked here before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when:
Are you willing to work split shifts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(NOTE: Split shifts are common in the restaurant industry)

Please check when you are available, and/or write in hours that you are available

	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Comments
Open (from 8am)								
Lunch								
Afternoon								
Dinner								
Close								

RECENT JOB HISTORY

1.	Employer	Phone ()	DATES EMPLOYED	
			FROM	TO
	Address			
	Job Title		HOURLY RATE	
	STARTING	FINAL		
Supervisor		Ok to Contact?		
Reason for Leaving				
2.	Employer	Phone ()	DATES EMPLOYED	
			FROM	TO
	Address			
	Job Title		HOURLY RATE	
	STARTING	FINAL		
Supervisor		Ok to Contact?		
Reason for Leaving				
3.	Employer	Phone ()	DATES EMPLOYED	
			FROM	TO
	Address			
	Job Title		HOURLY RATE	
	STARTING	FINAL		
Supervisor		Ok to Contact?		
Reason for Leaving				

EDUCATION

School Name	City, State	Currently a student?	Did you graduate?	Major/Degree
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade or Business School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

REFERENCES

Not that we don't believe you, but we'd like to talk to some other people who can confirm you're just the best person we could possibly hire. Can you give us their names and numbers? Please give us a couple that you've worked with, and a couple that you know personally.

Business References (3)

Name of Reference	Relationship
Years Acquainted	Phone#
Name of Reference	Relationship
Years Acquainted	Phone#
Name of Reference	Relationship
Years Acquainted	Phone#

Personal References (2)

Name of Reference	Relationship
Years Acquainted	Phone#
Name of Reference	Relationship
Years Acquainted	Phone#

SIGN HERE

Sign here that the above information is accurate and true to the best of your ability, that you love wings and can't wait to work here, you're okay with us running the background check, you'll follow all the rules of employment and that you understand that employment is "at-will".

Applicant's Signature	Date
Printed Name	Time