



Application for Employment (Page 1)

Date: ___/___/___

Opportunity Employer)

Date of Birth ___/___/___

***** PLEASE PRINT ALL *****

POSITION: _____ TYPE: Full-Time Part-Time

NAME: _____ SOCIAL SECURITY No.: _____

ADDRESS: _____ CITY: _____ STATE/ZIP: _____

PHONE : _____ ***** PLEASE CHECK ONE *****

Have you applied to any LI Wings N Things in the past? YES NO

IF Yes, provide position & date applied for: _____ Date: ___/___/___

Have you ever worked for any LI Wings n Things Restaurant? YES NO

IF Yes, provide Location & Date? Location: _____ ___/___/___

Can you provide proper documentation to prove your right to work in the U.S.? YES NO

When can you start work? ___/___/___ Desired Pay? \$ _____ Per Hour

Are you able to meet the requirements of attendance for this position? YES NO

Will you work overtime if required? YES NO

Have you ever pled "guilty" or "no contest" to, or Been convicted of a felony? YES NO

IF yes, please provide date(s) & details: _____

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness & nature of the violation, rehabilitation & position applied for will be taken into account.

List any special skills, training, certificates &/or licenses that may qualify you for the position you are applying:

***** REFERENCES *****

List name & phone number of three (3) work related references who are not related to you:

Table with 4 columns: NAME, PHONE, FROM, No of Yrs

***** EDUCATIONAL BACKGROUND *****

List the last three (3) schools attended, starting with the most recent:

Table with 5 columns: NAME of SCHOOL, # of Yrs, Degree/Doploma Earned, GPA, MAJOR



Date: ____/____/____

Application for Employment (Page 2)

(An Equal Opportunity Employer)

***** **EMPLOYMENT HISTORY** *****

In the following provide information of your past & current employers, start with your most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

Employer: _____ Address _____

Supervisor: _____ Phone: _____ Date: ____/____/____

May we contact for reference? YES NO Salary: _____

Summarize the type of work & job responsibilities: _____

Employer: _____ Address _____

Supervisor: _____ Phone: _____ Start date ____/____/____
 End Date: ____/____/____

May we contact for reference? YES NO Salary: _____

Summarize the type of work & job responsibilities: _____

***** **Authorization & Release** *****

I understand that LI Wings n Things (this company) is an employment-at-will policy, in that I or LI Wings N Things can terminate my employment any time, for any reason or no reason. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this if I am offered the job

My signature below authorizes the company to contact and investigate my former and current employers, and all other pertinent parties in order to fully investigate my background. I further authorize This Company to use any and all information acquired to make decisions regarding my employment.

I understand that under New York Law, no former employer or third party can be held liable if by supplying accurate and truthful information, I am caused to not be employed or am discharged. I hereby indemnify, release and forever discharge and hold all third parties supplying such information, harmless from any and all claims, demands, judgments and legal fees arising out of or in connection with this investigation, the results, or any lawful use of the results or disclosure thereto.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE AUTHORIZATION AND RELEASE STATEMENT

I certify that I have read, fully understand & accept all terms of the foregoing Authorization & Release statement

Signature of Applicant

____/____/____
Date Signed