

# THE LOFT AT LATITUDE 48.5

## Employment Application

Position Applying For:
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APPLICANT INFORMATION									
First Name		Last Name		MI		Date:			
Street Address				Apartment/Unit #					
City			State			ZIP			
Phone			E-mail Address						
Date Available				Do you smoke Cigarettes or E-Cigs?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Do you have a reliable form of transportation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Type of Transportation?						
Do you have any upcoming vacation plans?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so When?						
Have you ever worked for Latitude Restaurants before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so When/Where?						
What are your future goals?									
AVAILABILITY									
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
HOURS AVAILABLE	From								
	To								
EDUCATION									
High School				City & State					
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College				City & State					
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other				City & State					
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Additional Notes:									
REFERENCES									
<i>Please list two professional references.</i>									
Full Name				Relationship					
Company				Phone					
Address									
Full Name				Relationship					
Company				Phone					
Address									

**PREVIOUS EMPLOYMENT**

Company	Phone
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Address	Supervisor
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Job Title	Starting Salary \$	Ending Salary \$
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Responsibilities

From	To	Reason for Leaving
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May we contact your previous supervisor for a reference?    YES     NO

Company	Phone
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Address	Supervisor
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Job Title	Starting Salary \$	Ending Salary \$
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Responsibilities

From	To	Reason for Leaving
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May we contact your previous supervisor for a reference?    YES     NO

Company	Phone
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Address	Supervisor
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Job Title	Starting Salary \$	Ending Salary \$
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Responsibilities

From	To	Reason for Leaving
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May we contact your previous supervisor for a reference?    YES     NO

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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