



EMPLOYMENT APPLICATION

Applicant Name: _____

Date: _____

Desired position:

- Bartender
- Cook
- Server
- Host/Hostess
- Other _____

TOBACCO-FREE WORKPLACE

In accordance with Proposition 201, Smoke Free Arizona Act (A.R.S. 36-601.01), Top Shelf is committed to a smoke free workplace to protect the safety of workers and the public.

We appreciate the opportunity to review your qualifications for employment with the Top Shelf organization. In order to thoroughly consider your skills and abilities, we would appreciate your completion of our Employment Application. This employment application will only be valid for 30 days from the date of the application. If you wish to be considered for employment subsequent to that date, a new application must be completed. Top Shelf continues to seek professional and energetic candidates to join our team. We provide career opportunities in all areas of our business. Please note: some of our positions require certifications or accreditations.

Applicant Name: _____

Employment Application

PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS

Top Shelf "Company" subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, genetic information or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans with Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and state employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for thirty (30) days from today's date or until the positions applied for are filled, whichever first occurs.

POSITION

APPLIED FOR: _____

DATE: _____

Availability:

Sun	Mon	Tues	Wed	Thurs	Fri	Sat

Desired Amount of hours per week: _____

LOCATION

APPLIED FOR: Phoenix Peoria

Applicant Information

Name: _____

Last First M.I.

Street Address

City

State/Zip Code

Phone Number

Are you at least 14 years old?

Yes

No

If not, state your age for child labor law purposes only: _____

Are there any days, shifts or hours you will not work?

Yes

No

If yes, please explain: _____

E-mail: _____

Have you taken any illegal drugs in the last 30 days? _____

How did you learn of our Company? _____

If referral, who were you referred by? _____

Have you ever applied or worked here before? _____

Are you legally authorized to work in the United States? _____

Note: The Federal Immigration and Reform and

Control act of 1986 requires that an INS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization for work. This federal requirement must be satisfied as a condition of employment.

Have you been convicted of a felony within the last seven years? Yes No Date of Conviction: _____

Note: Answering "yes" does not automatically exclude you from further consideration for the position. If yes, please explain on the Additional Comments section, including the penalty imposed.

Have you been convicted within the last seven years of misappropriation of funds, embezzlement or other dishonest conduct, an offense involving the use of a weapon, physical assault or other violent crimes? Yes No If yes please explain on the Additional Comments section. Note: Answering "yes" does not automatically exclude you from further consideration for the position.

Name, City and State of Educational Institution	Graduated		If no Degree, Credits Earned	Type of Degree Received/Expected	Major	Minor	Grade Point Overall GPA
	Yes	No					
<i>High School</i>	<input type="checkbox"/>	<input type="checkbox"/>					
<i>College or University</i>	<input type="checkbox"/>	<input type="checkbox"/>					
<i>Technical/GED/Other</i>	<input type="checkbox"/>	<input type="checkbox"/>					
<i>Licenses, Certifications/Other</i>	<input type="checkbox"/>	<input type="checkbox"/>					

Employment History (Please complete for all full-time or part-time employment beginning with most recent employer)

Company Name _____

Telephone # _____

Address _____

Dates Employed From _____ To _____

Name of Supervisor _____ May we contact? Yes No

Rate of Pay Start _____ Last _____

State job titles and describe job duties _____

Reason for leaving _____

Company Name _____

Telephone # _____

Address _____

Dates Employed From _____ To _____

Name of Supervisor _____ May we contact? Yes No

Rate of Pay Start _____ Last _____

State job titles and describe job duties _____

Reason for leaving _____

Company Name _____

Telephone # _____

Address _____

Dates Employed From To

Name of Supervisor May we contact? Yes No

Rate of Pay Start Last

State job titles and describe job duties _____

Reason for leaving _____

Company Name _____

Telephone # _____

Address _____

Dates Employed From To

Name of Supervisor May we contact? Yes No

Rate of Pay Start Last

State job titles and describe job duties _____

Reason for leaving _____

References: (Please list three persons not related to you who know your qualifications)

Name	Address	Phone	Relationship

Please explain any gaps in your employment history.

Have you ever been discharged or forced to resign? Yes No If yes, please explain:

APPLICANT'S ACKNOWLEDGEMENT

Applicant Name: _____

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of the facts or incomplete answers in any application document will disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of the facts in any application document will be cause for my dismissal at any time without prior notice. I consent to and authorize Company or Company's Representative to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company or Company's Representative (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER(S) WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER(S) POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE PERSONNEL HANDBOOK OR ANY PERSONNEL MANUAL(S)) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER(S). I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF THE COMPANY.

I understand that applications for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests, take a driver's examination, submit to a background investigation, and take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize Company and Company's Representative and its clients to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to each other and to other Company clients for whom I have applied for employment, and release Company and Company Representative and its clients from any and all claims related to the lawful release of this information. I further authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the Company at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

Signature _____

Date: _____