



LAKESHORE RESTAURANT

1350 - 23rd AVENUE - REGINA, SASKATCHEWAN - S4S 3S5
306-584-3780

EMPLOYMENT APPLICATION

FULL NAME		POSITION APPLYING FOR
STREET ADDRESS		
CITY	STATE / PROVINCE	ZIP / POSTAL CODE
HOME PHONE	CELL PHONE	
EMAIL ADDRESS	DATE AVAILABLE TO START WORK	
ARE YOU LEGALLY ENTITLED TO WORK IN THIS COUNTRY?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
ARE YOU OLD ENOUGH TO SERVE ALCOHOL?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
DO YOU HAVE TRANSPORTATION TO AND FROM WORK?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
ARE THERE DAYS / NIGHTS YOU CANNOT WORK?		
<input type="checkbox"/> MON <input type="checkbox"/> TUES <input type="checkbox"/> WED <input type="checkbox"/> THURS <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN		
EDUCATION		
HIGH SCHOOL GRADUATE	<input type="checkbox"/> YES	COLLEGE GRADUATE <input type="checkbox"/> YES UNIVERSITY GRADUATE <input type="checkbox"/> YES
EMPLOYMENT HISTORY FOR YOUR LAST 3 JOBS		
COMPANY NAME	SUPERVISOR'S NAME	
JOB TITLE	START DATE	END DATE
REASON FOR LEAVING		
MAY WE CONTACT THIS EMPLOYER?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE NUMBER _____
COMPANY NAME	SUPERVISOR'S NAME	
JOB TITLE	START DATE	END DATE
REASON FOR LEAVING		
MAY WE CONTACT THIS EMPLOYER?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE NUMBER _____
COMPANY NAME	SUPERVISOR'S NAME	
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REASON FOR LEAVING		
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<input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE NUMBER _____

