

WINKS SALOON, BROWNSVILLE, TX APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws applicants are considered for positions without discrimination on the basis of race/color, religion, sex, national origin, citizenship, age, disability, marital status, veteran/military status, or any other consideration made unlawful by applicable federal, state, or local laws.

In order for you to be considered for employment, this application must be filled out COMPLETELY. Please write "N/A" if information is not applicable. Résumés, though welcome, should not be submitted in place of the information requested below.

PLEASE PRINT

First Name	Middle Initial	Last Name	Social Security or Other ID Number	Today's Date
Current Address:	Street/P.O. Box	Apt. #	City	State ZIP
Permanent Address:	Street/P.O. Box	Apt. #	City	State ZIP
Day Phone No.	Evening Phone No.	Alternate Phone No. (<input type="radio"/> Pager <input type="radio"/> Cell <input type="radio"/> Other _____)		
()	()	()		
For which position are you applying?			Date you are available for employment	
What is the minimum amount of money you expect to make? \$ _____/hour \$ _____/week				

1. If hired, can you present evidence that you are legally able to work in the United States? *(Proof of identity and legal authority to work in the United States is a condition of employment.)* Yes No
2. If hired, can you submit proof of legal age to work in this state? Yes No
3. Are you of legal age to serve alcohol in this state? Yes No
4. As an adult, have you been convicted of a felony or pled guilty to a felony resulting in conviction, which conviction has not been annulled, erased, expunged, vacated, set aside, sealed by the Court, or referred to a diversion program? *(Applicants in California, Connecticut, District of Columbia, Georgia, Hawaii, Massachusetts, and Washington should read the information on the last page of this application BEFORE answering this question.)*
..... Yes No

Conviction will not necessarily disqualify an applicant from employment. Factors such as the age and time of the offense, seriousness and nature of the violation, rehabilitation, and job-relatedness will be considered when making any employment decisions. If your answer is "yes," please explain the circumstances surrounding such offense, including place, date, name of court, etc.

5. Have you ever applied for a job with Winks before?
..... Yes No

What was the result? _____

6. How many jobs have you held in the last two years? 0 1 2 3 4 or more
7. Have you ever been terminated from a job? Yes No
If yes, how many jobs have you been terminated from? 1 2 3 4 or more
8. You want to work: Part-time (_____ hours per week) Full-time (_____ hours per week)

9. Do you presently have a job that you intend to keep? Yes No

10. In the table below, please indicate the days you **CAN** work. **List the earliest and latest times you CAN work.** Please account for travel time to and from other obligations (e.g., sports, classes, meetings, etc.). Being on time for a shift is mandatory.

	MON	TUES	WED	THURS	FRI	SAT	SUN
Earliest time in							
Latest time out							

11. Do you have a reliable means of transportation to and from work for the days and times you are available? Yes No

12. Are you available to work holidays and weekends? Yes No

13. We may conduct training on days, or at times, you have other obligations. Is your schedule flexible so you may come to training? Yes No

14. Are you, or do you plan to be, in school or taking courses at any time while working here? Yes No

15. If you have other obligations or commitments that may affect your schedule (such as travel plans) please indicate the particular dates and times that you will be unavailable. *(You may omit any information indicating legally protected characteristics such as race/color, religion, sex, national origin, citizenship, age, disability, marital status, or veteran/military status.)* _____

16. Education

	Name and Location of School	Dates Attended	Last Year Completed	Major/Specialty	Degree Received
High School		(Please leave blank.)	Grade: 9 10 11 12	(Please leave blank.)	
College/ Other		From _____ / _____ Month Year To _____ / _____ Month Year			

17. Do you agree not to bring into any Company facility confidential information of any third parties that relates in any way to the restaurant industry, and to keep confidential and not disclose any of the Company's or any third parties' confidential information? Yes No

18. Have you read a job description for the position of interest? Yes No
 Do you understand the job requirements? Yes No

19. Can you perform the essential functions required by the job for which you are applying either with or without reasonable accommodations? Yes No

20. Personal References (other than immediate family):

Name	Phone Number	Number of Years Known	Relationship

21. Work History (List your last 3 jobs.)

	Current or Most Recent Job	Previous Job	Previous Job
Company Name			
Address			
Position			
Job Duties (please describe)			
Did you handle cash?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Name and Title of Immediate Supervisor			
Phone Number of Immediate Supervisor			
Dates of Employment	____/____/____ to ____/____/____ Month Year Month Year	____/____/____ to ____/____/____ Month Year Month Year	____/____/____ to ____/____/____ Month Year Month Year
Usual Number of Hours Worked per Week			
Reason for Leaving			
Weekly Earnings	\$____ Starting \$____ Ending	\$____ Starting \$____ Ending	\$____ Starting \$____ Ending
All employers, including your current employer, may be contacted to verify the information you provide.	May we contact your current employer prior to any offer of employment? <input type="radio"/> Yes <input type="radio"/> No	May we contact this employer prior to any offer of employment? <input type="radio"/> Yes <input type="radio"/> No	May we contact this employer prior to any offer of employment? <input type="radio"/> Yes <input type="radio"/> No

I declare that I am qualified to perform all the duties of the position I am seeking. I also declare that the information provided in this Application is correct and that any false statements or omissions will justify my rejection for or dismissal from employment. I authorize the Company to conduct any necessary investigation regarding my background (including inquiries of me, prior or current employers, schools and other persons, institutions, or businesses, and checking motor vehicle records, court records and criminal records) as it relates to the position I am seeking and to the extent permitted by federal, state, and local law. I agree to complete the requisite authorization forms for the background investigation. I hereby release all parties from any liability in connection with the provision and use of such information. I will agree to a drug test, if permitted by law, to be paid for by the Company. (The results of any drug tests may, consistent with applicable law, be used to make employment decisions, including decisions relating to hiring and continued employment.) I understand and agree that this Application for employment does not create a contract for employment or a guarantee of employment. I understand and agree that if I am hired, my employment is "AT-WILL" which means that my employment is for no definite period of time and either the Company or I may terminate the employment relationship with or without cause at any time, with or without any advance notice. I understand that only the CEO may change the AT-WILL status of any applicant or employee and may only do so in writing. I understand that any policies or procedures implemented by the Company in the event of my employment do not alter my AT-WILL employment status. I understand that the Company, in its sole discretion, may at any time change its personnel policies and may also change my job description, responsibilities, wages, and benefits. The Agreement to Arbitrate accompanying this Application must be read and signed in order to be considered for employment with the Company. By signing the Agreement to Arbitrate I understand that the employment AT-WILL relationship will not be altered.

I HEREBY ACKNOWLEDGE AND UNDERSTAND THE NOTICE AS DESCRIBED ABOVE AND THAT IF I AM HIRED I WILL BE AN AT-WILL EMPLOYEE.

SIGNATURE: _____

DATE: _____
