



Original Oyster House

701A Gulf Shores Parkway
Gulf Shores, AL. 36542
(251)928-2620

Application for Employment

Date: _____

(Please Print Clearly)

Fill in all spaces. If an item does not apply, write "none". This application will be considered active for 1 year from this date. You must complete your own application. Applicants with disabilities who desire accommodation in completing the application are invited to discuss their needs with us. If an answer requires additional space, please use additional sheets. **Failure to complete this application fully and legibly may result in your application not being considered.**

LAST NAME		FIRST	MI	SOCIAL SECURITY NUMBER	
PRESENT ADDRESS			CITY	STATE & ZIP	PHONE NUMBER
PREVIOUS ADDRESS			CITY	STATE & ZIP	PHONE NUMBER
POSITION APPLIED FOR:			SALARY REQUIRED		DATE AVAILABLE
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time / List days and hours available: _____					
How did you hear about us? <input type="checkbox"/> employee referral <input type="checkbox"/> newspaper <input type="checkbox"/> high school recruitment <input type="checkbox"/> employment agency <input type="checkbox"/> former employee <input type="checkbox"/> walk in <input type="checkbox"/> internet job board (which one)					
Employee Name: _____			Which site: _____		

The restaurant industry occasionally requires overtime and often without advance notice; do you agree to work overtime if needed?
Yes No

Have you or a relative ever worked for this company? Yes No
If yes, please name the relative and/or dates of employment: _____

Have you ever applied with this company before? Yes No
Do you have the legal right to work in the United States? Yes No If hired, proof of status will be required.

Have you ever been convicted of a felony? Yes No
If yes, please give details including dates, places & judgment given: _____

Conviction of a crime is not an automatic bar to employment. All circumstances are considered.

Have you ever served in the U.S. Armed Services? Yes No Date entered service: _____
If so, list branch or branches: _____ Date of discharge: _____

Are you at least 18 years of age: Yes No

EDUCATION	NAME OF SCHOOL	HIGHEST LEVEL COMPLETED	GRADUATED
HIGH SCHOOL		9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No
COLLEGE		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER			<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you currently employed? Yes No

May we contact your current employer? Yes No

EMPLOYMENT HISTORY

Start with the most recent employer and list all dates.

Company	Address		Phone Number
Job Title	Final Rate of Pay	Name of Supervisor	
Dates Employed: From:	To:	Reason for Leaving	

Company	Address		Phone Number
Job Title	Final Rate of Pay	Name of Supervisor	
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Company	Address		Phone Number
Job Title	Final Rate of Pay	Name of Supervisor	
Dates Employed: From:	To:	Reason for Leaving	

PERSONAL REFERENCES WHO ARE NOT RELATIVES OR FORMER EMPLOYERS

	NAME	Address	Phone	Occupation	Years Known
1					
2					
3					

List any scholastic or work related awards you have received:

What do you like most about the Restaurant Business?

Do you have any special training or qualifications that you feel might be utilized in the position for which you are applying?

In a brief statement, explain why you would be a valued addition to our Company?

Reliability and punctuality are extremely important to our Business. Do you have adequate and reliable transportation?

Personal appearance, grooming and hygiene are sensitive subjects but are extremely important in the restaurant industry. Long hair must be pulled back and secured at all times; men working in the dining areas must be clean shaven or have a well-kept mustache only; men working in the kitchen may have facial hair but it must be kept trimmed and short. Tattoos must be kept covered and no piercings are allowed except for one earring in each ear. Would you be able and willing to comply with these standards?

OUR MISSION STATEMENT

We Will Exceed Our Customers Expectations.....with the Best Employees in the World!

OUR CORE VALUES – F.I.S.H.H.

Family Friendly – Caring, Southern Hospitality

Integrity – Doing what's right

Spiritual - Faith

Honest – Trustworthy

Helping – Team Work



IMPORTANT: READ CAREFULLY

Ark Restaurants, Original Oyster House, is proud to be an equal opportunity employer. We are committed to providing equal employment opportunities to you and all other persons without regard to race, creed, color, religion, national origin, sex, marital status, citizenship status, age, veteran status or disability.

This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for rejection or immediate dismissal. Routine inquiry may be made during our initial or subsequent processing which will provide applicable information concerning character, general reputation, personal characteristics, and mode of living. Upon written request, additional information as to the nature and scope of the inquiry if one is made, will be provided.

I understand that the use of this form does not indicate that there are positions open and does not in any way obligate the Company. If employed, I will comply with the Company's rules and regulations. Further, I understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time, for any reason, without notice. No person other than the President of the Company may modify or amend the provisions stated herein.

I understand that my employment may be conditioned upon a health evaluation which may include physical examination by a doctor selected by the Company. This health evaluation may also include a test for drugs and/or alcohol. By signing this application, I hereby agree to submit to such examinations and tests and release all persons and companies from any liability arising out of such examinations and tests.

I hereby authorize release of any information regarding any criminal convictions that may exist against me and ask my former employer(s) and all other persons named herein who might have information concerning me to give any information regarding my former employment or any other information they may have regarding me whether or not the same is a matter of record, and I hereby release them and each of them from liability for any damage whatsoever which I could or might claim because of such disclosure.

I certify that all statements made by me on this application are true and complete.

I hereby acknowledge that I have read and understand the above statement.

DATE: _____ SIGNATURE: _____