APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

In order for you to be considered for employment, this application must be filled out in its ENTIRETY. All statements made by applicants for employment on this application form will be checked for accuracy.

Name (Print in Ink)							Today's Date				
Current Address							Į.				
Previous Address						E-mail add	ress				
Social Security Numb	er				Work Phone No	Work Phone No Alternate Phone No					
Position(s) applying for (Must check specific position listed to be considered)					Home Phone No	Home Phone No Cellular Phone No					
☐ Server ☐ Host [☐ Bartender	☐ Busse	er 🗆 Baker		Did (
☐ Line Cook ☐ Production ☐ Utility ☐ Food runner					If yes, who?	Did someone refer you to apply for this position? ☐ Yes ☐ No If yes, who?					
requirement to serve	r a server or b alcohol? $\ \square$	oartender p I Yes □	position, do you meet th No		It is the policy of this E authorized to work in prior to beginning worl	Do you have the legal right to work in the United States?					
Date you are available to start employment		How many hours per week do you expect towork?			Expected Hourly Rate	Expected Hourly Rate			Expected weekly Earnings		
Work Schedule Availability											
					end as late as 2AM (pleas						
Shift Lunch	MOI to	N	TUES to	WED to	THUR to	FRI to	,	to	SUN to		
Dinner	to		to	to	to	to		to	to		
Are you willing to work a split shift? \(\text{Yes} \) No \\ \text{Are you willing to stay late in an emergency? } \(\text{Yes} \) No								ιο			
Are you willing to work holidays / weekends? Yes No Is your schedule flexible so you can attend training? Yes No No											
Education		Name and location of school			Last year	Courses majored		Graduate? List Degrees.			
High School					9 10 11 12			Diploma:	Yes 🗆 No		
College					1 2 3 4						
Other											
Have you been convicted of a felony, or been incarcerated in connection with a felony, in the past 10 years? (You do not have to disclose any convictions that have been annulled, expunged, erased, pardoned, or sealed by a court. A conviction will not necessarily exclude you from employment. Yes No If you answered "Yes," please explain											
Work History – List your last 3 jobs. Please fill out all information completely											
		C	Current or Most Rece	ent Job	Previous Jo	b		Previou	s Job		
Company Name											
Company Address											
Company Phone Number											
Name and Title of Imr Supervisor	mediate										
Job Title / Position											
Dates of Employment	t	/		nth/Year	/ Month/Year to Month/Year		/ 				
Reason for Leaving											
May we contact this e	May we contact this employer		☐ Yes ☐ 1	No	☐ Yes ☐	□ No	□ Yes □ No				
Rate of Pay		\$ \$ Starting Wage Ending Wage			\$ Starting Wage Ending Wage		\$ \$ Starting Wage Ending Wage				

MILITARY EXPERIENCE (Ifapplicable)	Skills Acquired						
VOLUNTEER EXPERIENCE, List Activities & Skills Acquired: (Exclude activities relating to race, religion, color, ancestry, age, national origin, gender and disability)							
Special Employment Notices (Please read carefully before signing below)							
G&M Restaurant and Lounge (the "Employer") does not discriminate in hiring or employment on the basis of race, color, religion, sex, sexual orientation, national origin, ancestry, age (as defined by applicable law), legally recognized handicap, or veteran status. The Employer is subject to the provisions of the resident state's Workers' Compensation Act and provides all staff members with coverage.							
		Initial					
I understand that many of the required duties of the positions available in the restaurant, especially for bussers, food runners, line cooks, servers, barbacks, and bartenders require that employees have the ability to continuously stand or walk during a 8-hour shift; the ability to bend, squat, climb stairs and lift frequently; and the ability to lift up to 25 pounds frequently during an 8-hour shift.							
		Initial					
Statement							
I certify the facts set forth in my application are true and complete. I understand and agree that, if employed, any misrepresentation, false statements, or omission of facts on this application may result in dismissal. I authorize the Employer check all personal and employment references and to verify all information. I have included on this application form.							
I understand and agree that this application, policies, practices and procedures, and all other communication distributed to me by the Employer do not constitute or supplement any contract of employment. If I am hired, I understand and agree that all benefits, policies, and procedures may be changed by the Employer at any time, with or without notice. I further understand and agree that I have the option to terminate my employment relationship with the Employer, with or without cause and without notice at any time, and that the Employer retains a similar right.							
I understand and agree that this application will be kept on active file for 30 days from the date completed, after which time I would have to reapply in accordance with established company procedures. However, I understand and agree that the agreement to submit eligible disputes to the DRP does not terminate after 30 days and applies to my entire length of employment.							
		Initial					
Signature of App	licant	Date					
Maryland: UNDER MARYLAND LAW, AN EMP PROSPECTIVE EMPLOYMENT, OR ANY EMPL							

EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. ANY EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.