

SHARKY'S EMPLOYMENT APPLICATION

complete all fields, then fax, mail or bring in yourself.

Programs, services and employment are equally available to everyone. Please inform the Human Services Department if you require reasonable accommodation for application or interview.

Date of Interview (Mon/Day/Year)

Applicant Data

How were you referred to us? Position sought:

Full name:

Address: City: State: Zip:

Phone: Mobile/pager/other: E-mail:

Date Available to Start: Social Security Number: Salary Requirements:

If you are under 18 years of age, can you provide a work permit? Yes No If no, please explain:

Have you ever worked for this company? Yes No If "yes", when? (Year):

Are you legally qualified to work in the United States? Yes No

Type of employment desired: Full-Time Part-time Temporary Seasonal

Have you ever pleaded guilty, no contest or convicted of a crime? Yes No If yes, give dates and details:

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number (if applicable to position): License #: State:

Education History

High School NAME: High School LOCATION: Graduate? Yes No

College(1)Attended : Name/Location Years Attended (from/to): Degrees Earned: Other subjects studied:

College(2)Attended : Name/Location Years Attended (from/to): Degrees Earned: Other subjects studied:

Trade, Business, or Correspondence School: Years Attended (from/to): Subjects studied: Graduate? Yes No

Summarize Your Special Skills or Qualifications

Previous Employment (begin with most-recent position)

Dates of Employment: From: To: Positions held:

Company name: Address:

City: State: Zip Code:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for leaving:

May we contact this employer for a reference? Yes No

Dates of Employment: From: To: Positions held:

Company name: Address:

City: State: Zip Code:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for leaving:

May we contact this employer for a reference? Yes No

Dates of Employment: From: To: Positions held:

Company name: Address:

City: State: Zip Code:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for leaving:

May we contact this employer for a reference? Yes No

" I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damages that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Signature of Applicant: _____

Date:

SUBMIT VIA FAX:

after completing all fields, PRINT FORM,
sign application by hand, and FAX
signed application to: (901) 682-9797.

SUBMIT VIA MAIL:

after completing all fields, PRINT FORM,
sign application by hand, and mail to:
Sharky's Gulf Grill, 6201 Poplar Avenue,
Memphis, TN 38119. Attn: Human
Resources.