AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT
This application must be filled out in its ENTIRETY to be considered for employment.
Resumes, though certainly welcome, should not be submitted in lieu of information requested below.

PLEASE PRINT

Date:_____
      Month   Day   Year

Name:_____ Social Security No._____
     First   Middle   Last

Address:_____
     Street   City   State   Zip Code

Home Phone: (_____)_____ Cell Phone: (_____)_____

Emergency Contact Name:_____ Relationship:_____ Number:_____

Age (If Under 21):_____ Birth Date (If Under 21):_____ E-Mail:_____
                             Month   Date   Year

Are you legally able to work in the United States? Yes ☐   No ☐
Proof of identity and legal authority to work in the U.S. is a condition of employment.

Have you ever been convicted of a felony which has not been annulled or sealed by a court?   Yes ☐   No ☐
If yes, please explain below. *Convictions will not necessarily exclude you from employment, but date and type of conviction may be considered for job placement.*

For what position(s) are you applying? (*Specific or multiple positions must be checked for this application to be considered.*)

Back of the House: ☐ Line Cook   ☐ Prep Cook   ☐ Kitchen Help ☐ Dishwasher ☐ Kitchen Supervisor/ Sous-Chef

Front of the House: ☐ Bartender ☐ Barback ☐ Busser ☐ Food Runner ☐ Host   ☐ Server ☐ Shift Lead/Supervisor

Management: (*Additional Resumes/CVs Required*): ☐ Assistant Manager ☐ Kitchen Manager/Chef ☐ General Manager

Expected Starting Hourly Rate:_____Expected Weekly Earnings:_____

Work Schedule Availability

Shift	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
IN							
OUT							

Are you willing to work a split shift? Yes ☐ No ☐   Are you willing to stay late if you are needed? Yes ☐ No ☐

How many hours per week do you expect to work? _____   Date available for employment? _____

About Yourself (List anything you would like us to know about yourself)

Education (Please fill in any or all academic accomplishments)

| |
| |

Work Experience (List most recent three employers)

Previous Employer	Phone Number ( )	Start Date	Name of Supervisor	Title
Street Address		End Date	Your Position	
City State Zip Code		Salary	Reason for leaving	

May we contact the employer listed above prior to any offer of employment?   Yes ☐   No ☐

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I UNDERSTAND THAT BUCKET O' CRAWFISH LLC, d/b/a BUCKET O' CRAWFISH HAS IN PLACE A DISPUTE RESOLUTION PROCEDURE, AND I FURTHER ACKNOWLEDGE AND AGREE THAT IF I AM OFFERED AND ACCEPT EMPLOYMENT, ANY DISPUTE BETWEEN ME AND BUCKET O' CRAWFISH LLC, d/b/a BUCKET O' CRAWFISH RELATING TO MY EMPLOYMENT AND/OR MY SEPARATION FROM EMPLOYMENT, SHALL BE SUBMITTED WITHIN ONE (1) YEAR OF THE DAY WHICH I LEARNED OF THE EVENT AND SHALL BE RESOLVED PURSUANT TO THE TERMS AND CONDITION OF THE DISPUTE RESOLUTION PROCEDURE.

NOTICE TO ALL APPLICANTS: You are hereby notified that you must complete and sign your Employee Handbook that will detail the rules and regulations of BUCKET O' CRAWFISH LLC. Not reading and signing the Employee Handbook may inevitably delay your application process and may also cause your application to be revoked. All policies are subject to change, and this notice may not hold the current information. Please inquire if this is a current application.

I AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE. ANY MISREPRESENTATION, FALSE STATEMENT, OR OMISSION OF FACTS CALLED FOR SHALL BE GROUNDS FOR REFUSAL OF EMPLOYMENT OR IF HIRED, DISMISSAL FROM EMPLOYMENT. I UNDERSTAND THAT ANY VIOLATION OF COMPANY RULES, POLICIES, STANDARDS, AND/OR PROCEDURES SHALL BE GROUNDS FOR DISMISSAL. I AGREE TO CONFORM TO THE RULES, POLICIES, STANDARDS, AND REGULATIONS OF BUCKET O' CRAWFISH. I UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME AT THE OPTION OF BUCKET O' CRAWFISH OR MYSELF, AND I UNDERSTAND THAT NO REPRESENTATIVE OF THE COMPANY HAS THE AUTHORITY TO MAKE ANY MODIFICATIONS, EITHER VERBALLY OR IN WRITING TO THE CONTRARY.

IT IS THE POLICY OF BUCKET O' CRAWFISH TO HIRE ONLY U.S. CITIZENS AND ALIENS WHO ARE LAWFULLY AUTHORIZED TO WORK IN THE UNITED STATES. ALL EMPLOYEES WILL BE ASKED TO VERIFY EMPLOYMENT ELIGIBILITY PRIOR TO BEGINNING WORK.

SIGNATURE OF APPLICANT: _____ DATE: _____

I UNDERSTAND THAT MY APPLICATION WILL REMAIN ACTIVE FOR 90 DAYS FROM THE DATE RECEIVED.