

# RUBY TEQUILA'S APPLICATION FOR EMPLOYMENT

Ruby Tequila's is proud to be an equal opportunity employer. It is our policy to grant equal employment opportunities to all qualified applicants and employees without regard to their race, color, religion, sex, marital status, age (subject to legal minimums), national origin, citizenship status, disability, veteran status, sexual orientation, and any other protected status under federal, state, or city laws. Applicant is completing the application for Ruby Tequila's referred to as the "Company".

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## PERSONAL INFORMATION

## Current Date

Name (Last Name First)		Last four digits of Social Security Number	
Present Address	City	State	Zip Code

Phone	E-mail Address	Referred by
Are you over the age of 16? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you over the age of 18? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a US citizen, or otherwise authorized to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>

## EMPLOYMENT DESIRED

Position desired	Date you can start	Salary desired
Are you currently employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	If so, may we contact your current employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever applied with this company before? Yes <input type="checkbox"/> No <input type="checkbox"/>	Where?	When?

## FORMER EMPLOYERS

(List below four employers, starting with your most recent first.)

Month/Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

**EDUCATION HISTORY**

	Name and Location of School	Years Attended	Did You Graduate	Subjects Studied?
High School				
College				
Trade, Business, or Correspondence				

**AVAILABILITY**

(Print the earliest in-time and latest out-time for each shift. If not available, put an X through the shift.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Lunch	/	/	/	/	/	/	/
Dinner	/	/	/	/	/	/	/

**REFERENCES**

(List below the names of three persons, not related to you, that we may contact.)

Name	Phone No.	Business	Years Known

**AUTHORIZATION**

I authorize the "Company" to investigate all information pertinent to my application in order to determine my qualifications for employment, which may include contacting former and/or current employers or any other person or entity. I authorize all persons and entities having information relevant to my application to provide information to the "Company". I understand that any offer of employment may be rescinded or my employment terminated if my references are inadequate or unacceptable to the Company.

I certify and affirm that the information provided in connection with this application is true, accurate and complete, and that I have withheld nothing that would, if disclosed, affect the application unfavorably. I understand that any omission, misrepresentation, or falsification in connection with this application may be grounds for denial of employment, or, if hired, immediate termination of employment.

Employment is not guaranteed or a matter of right. The employment relationship between you and the "Company" is AT-WILL. Each party has the right to terminate the employment relationship, for any reason or no reason at all, at any time, with or without prior notice.

Date \_\_\_\_\_

Signature \_\_\_\_\_