



Application for Employment
Please Complete Fill Application, print and sign. Submit through website or bring to restaurant.

Personal Information

Name *

First Name Last Name

Address *

Street Address

Street Address Line 2

Phone Number *

Please enter a valid phone number.

City

State

SSN

Social Security Number

Zip Code

Country

Job Specific

Desired Position

Start Date *

Month Day Year

Availability

Morning

Evening

Night

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Are you 18 years of age or older? *

Can you provide a NYS Work Permit?

Are you legally allowed to work in the United States? *

Have you ever pleaded guilty, no contest, or been convicted of a crime? *

Answering 'Yes' to this question does not constitute automatic rejection for employment. Date of offense, seriousness and nature of violation, rehabilitation and position applied for will be considered.

If yes, please explain:

Explanation of violation

Employment History
Descending (most recent job first)

Company Name

Phone Number

Company Phone Number

I am Currently Employed here

May we contact this employer for reference

From Date

To Date

Month Day Year

Month Day Year

Position Held

Supervisor

First Name

Last Name

Company Name

Phone Number

Company Phone Number

I am Currently Employed here

May we contact this employer for reference

From Date

To Date

Month Day Year

Month Day Year

Position Held

Supervisor

First Name

Last Name

Company Name

Phone Number

Company Phone Number

I am Currently Employed here

May we contact this employer for reference

From Date

To Date

Month Day Year

Month Day Year

Position Held

Supervisor

First Name Last Name

Acknowledgement

By signing this document you agree to the following:

I certify that my answers are true and complete to the best of my knowledge. I authorize you (Bella Michael's) to make such investigations and inquires of my personal, employment, educational, financial and other related mattes as necessary for an employment decesion. I hereby release employers, schools, or individuals from libiality when responding to inquiries in connection to my application.

In the event I am employed, I understand that false or misleading information given in my application or interview may result in discharge.

Signature

Date *

Month Day Year
