



The Old Spaghetti Factory was voted by Its Employees as
One of the Top 25 Employers to work for in British Columbia

EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. It is our policy to abide by all Federal, Provincial and local laws concerning Discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

Last Name _____ First _____ Middle _____			Date
Email Address:			Social Insurance # (Optional Prior to Hiring)
Address – Street			Home Phone:
City	Province	Postal Code	Cell Phone:
Were you previously employed by The Old Spaghetti Factory? <input type="checkbox"/> Yes – Date(s) _____ <input type="checkbox"/> No			How long have you lived in here?
List any relatives or friends working for The Old Spaghetti Factory			Are you of legal drinking age?
	Name		Relationship
	_____	_____	_____
	_____	_____	_____
In case of accident, notify: Name: _____			
Phone Number: _____			

EDUCATION	NAME/LOCATION OF SCHOOL	FROM	TO	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE?	DIPLOMA OR DEGREE
HIGH SCHOOL						<input type="checkbox"/> Yes <input type="checkbox"/> No	
TRADE OR BUSINESS SCHOOL						<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE OR UNIVERSITY						<input type="checkbox"/> Yes <input type="checkbox"/> No	
GRADUATE SCHOOL						<input type="checkbox"/> Yes <input type="checkbox"/> No	

Do you have any specialized Hospitality Industry training? Please describe: _____

Have you ever been convicted of a felony? (Conviction will not necessarily disqualify an applicant for employment):

Yes No

If Yes, please describe: _____

Do you have the legal right to work in Canada? Yes No When does your visa expire? _____

Describe what form of transportation you would use to and from work? _____

Are there any hours, shifts or days you cannot or will not work? _____

Is the address provided your permanent address? Yes No



EXPERIENCE – list Present and Former Employers beginning with most recent:

Name and Address of Company	Phone Number	Supervisor	Position	Last Wage	Date Started	Date Left	Reason for Leaving	Contact Information

May we contact the above employers? Yes No

Additional Remarks: _____

REFERENCES

Name	Phone Number	Email Address	Relationship	Number of Years Known

POSITION APPLIED FOR:	PREFERENCES:
<input type="checkbox"/> Server <input type="checkbox"/> Bus Person <input type="checkbox"/> Host/Hostess <input type="checkbox"/> Kitchen – Day Prep <input type="checkbox"/> Kitchen – Line Cook <input type="checkbox"/> Kitchen - Dishwasher	<input type="checkbox"/> Day Shift <input type="checkbox"/> Night Shift <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Number of Shifts Desired Per Week 1 2 3 4 5

APPLICANT’S CERTIFICATION – Please read carefully before signing.

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal at any time. I authorize the Company to make an investigation concerning my background or of any facts set forth in this application. I hereby release the Company, any agent appointed by the Company, and all their respective employees and employers from any liability related to or arising out of the exchange of such information.

Applicant’s Signature

Date

FOR OFFICE USE ONLY					M	T	W	Th	F	Sa	Su	
P	1	2	3	4	5	Day	D	D	D	D	D	D
C	1	2	3	4	5	Night	N	N	N	N	N	N