



saltlik
A RARE STEAKHOUSE

EMPLOYMENT APPLICATION FORM

Saltlik Steakhouse is an Equal Opportunity Employer. It is the policy of Saltlik Steakhouse to recruit, hire, and promote for all job classifications and administer all personnel functions without regard to race, creed, colour, religion, ancestry, national origin, marital status, pregnancy, sexual preference, citizenship status, personal disability, sex, or age.

I. PERSONAL INFORMATION

Last Name	First	Middle	Email Address
Street Address			Home Phone ()
City	Postal Code	Province	Cell Phone ()
If hired, can you provide verification of your legal right to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a valid Social Insurance Number that allows you to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you of legal working age? <input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, would you have reliable transportation to and from work? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you know anyone who is working for our company? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have your Alcohol Service Certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No # _____		If "Yes" Name and Relationship:	
Have you worked for Saltlik Steakhouse before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes: Position: _____ Location: _____			
Start Date: _____ Employment End Date: _____			
Reason For Leaving:			

II. EMPLOYMENT INTERESTS

Position Desired:	Date Available:																								
Type of Employment Desired (check all that apply)	Availability:																								
Regular <input type="checkbox"/> Full-Time <input type="checkbox"/>	<table border="1"> <tr> <td></td> <td>Mon</td> <td>Tues</td> <td>Wed</td> <td>Thurs</td> <td>Fri</td> <td>Sat</td> <td>Sun</td> </tr> <tr> <td>Day</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/></td> <td>Night</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Day								Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/>	Night						
		Mon	Tues	Wed	Thurs	Fri	Sat	Sun																	
Day																									
Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/>	Night																								
How were you referred to our company?																									

III. EDUCATION INFORMATION

School Level	Name and Location of School	Course of Study	Did you graduate?	Certificate or Degree Received
High School			<input type="checkbox"/> Y <input type="checkbox"/> N	
College/University			<input type="checkbox"/> Y <input type="checkbox"/> N	
Post Graduate			<input type="checkbox"/> Y <input type="checkbox"/> N	
Business/Trade			<input type="checkbox"/> Y <input type="checkbox"/> N	

IV. REFERENCES

(Business references who we can contact who have knowledge of your employment and competence)

Name	Title and Company	Phone #	Describe Work Relationship



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V. EMPLOYMENT INFORMATION (Begin with Current or Most Recent Employer)

1	Company Name and website link if applicable		Phone ()		From Mo./Yr.	To Mo./Yr.
	Street Address	City	Province	Postal Code	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Company Name and website link if applicable		Phone ()		From Mo./Yr.	To Mo./Yr.
	Street Address	City	Province	Postal Code	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Company Name and website link if applicable		Phone ()		From Mo./Yr.	To Mo./Yr.
	Street Address	City	Province	Postal Code	Starting Pay \$	Ending Pay \$
	Job Title	Duties			Reason for leaving	
	Supervisor Name				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

VI. ACKNOWLEDGMENT

Please read carefully, initial each paragraph, and sign below

Initial	I hereby certify that I have not withheld or misstated any material facts that might adversely affect my application for employment and that the answers given by me are true and correct. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application, or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
Initial	I hereby authorize Saltlik Steakhouse to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment, and further, I authorize my former employers listed in this application to speak to officials of and disclose to Saltlik Steakhouse any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. I authorize disclosure of this information in compliance with and in waiver of my rights under applicable privacy legislation.
Initial	I understand that all offers of employment are conditioned upon my providing satisfactory documentary proof of my identity and legal right to reside and work in the Canada.
Initial	I understand that nothing contained in this application or conveyed during the interview process is intended to create an employment contract between Saltlik and me. In addition, I also understand that if hired, there will be a 90 day probationary period at the beginning of my employment, during which period I may be terminated if my services prove to be unsatisfactory.
Applicant's Signature:	
Date:	

*We thank all applicants for their interest in working with Saltlik.
However, only those selected for an interview will be contacted.*