



Vail Chophouse

Employment Application

WE ARE A NON-SMOKING COMPANY

Please print legibly

Applicant Information

Full Name: _____ **Date:** _____
Last First M.I.

Mailing Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ **E-mail Address:** _____

Date Available: _____ **Social Security No.:** _____ **Desired Salary:** \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO **If no, are you authorized to work in the U.S.?** YES NO

Have you ever worked for this company? YES NO **If so, when?** _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES NO **Degree:** _____

College: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES NO **Degree:** _____

Other: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES NO **Degree:** _____

References

Please list three professional references.

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** () _____

Address: _____

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** () _____

Address: _____

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** () _____

Address: _____