



Application for Employment

Clancy's Pub - OMAHA NEBRASKA

2905 South 168th Street T: 402-505-4400

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

Applicant Information

First Name _____ Last _____

Street Address _____

Social Security Number (Not required if application submitted online.) _____

City/State/Zip _____ Phone (____) _____

Position(s) applied for _____ **Date** ____ / ____ / ____

Why are you seeking a new job at this time? _____

If hired, do you have a reliable means of transportation to get to work? ____ Describe _____

Are you at least 19 years old? _____

Are you legally eligible for employment in the U.S.? ____ (Proof is required.)

Have you been convicted of a crime? Yes No If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

List any special skills or training: _____

Employment Information

Are you seeking full time, part time or temporary employment? _____

What hours and shift(s) would you prefer to work? _____

Are you willing to work overtime? __ Weekends? __ Holidays? ____

Are you currently employed? __ If hired, when would you be able to start? _____

Have you ever been discharged or asked to resign from any position? ____ If yes, please describe: _____

Education (circle highest level achieved)

Secondary: 9 10 11 12 G.E.D. College: 1 2 3 4 5 6 7 8

Name of School: _____ Name of School: _____ Major: _____

Location of School: _____ Location of School: _____

Work History (please begin with most recent, continue on second page)

1. **Company** _____ Phone No. with Area Code (____) _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

2. **Company** _____ Phone No. with Area Code (_____) _____
 Address _____ City/State/Zip _____
 Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
 Job Title _____ Supervisor's Name & Title _____
 Describe duties briefly: _____
 Specific reason for leaving: _____

3. **Company** _____ Phone No. with Area Code (_____) _____
 Address _____ City/State/Zip _____
 Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
 Job Title _____ Supervisor's Name & Title _____
 Describe duties briefly: _____
 Specific reason for leaving: _____

For references purposes: Have you worked for any of these organizations or attended school under a different name? _____

If yes, give name and organization(s) _____

May we contact the employers listed above? _____ If not, list the employers you do not wish us to contact and why:

Availability

___ MONDAY ___ TUESDAY ___ WEDNESDAY ___ THURSDAY ___ FRIDAY ___ SATURDAY ___ SUNDAY

Authorizations & At-Will Employment Agreement

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date.

I authorize this company to request a copy of my motor vehicle driving record, criminal records and any other investigative report deemed necessary through various third party sources.

A condition of employment or continued employment and understand that a refusal to submit to such testing during the course of my employment, if hired, may result in disciplinary action, up to and including termination.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time and may be terminated at any time.

Name (please print) _____ Date _____

Signature _____