



EMPLOYMENT APPLICATION

Position you are seeking	<input type="checkbox"/> Cook & Kitchen	<input type="checkbox"/> Telephone Reception/Front Counter
DATE: _____	<input type="checkbox"/> Delivery Driver	<input type="checkbox"/> Assistant Manager

How did you learn about this position?

- ☐ Advertisement (specify source) _____
 ☐ Friend
 ☐ Employment Dept
 ☐ Walk-In
 ☐ Website
 ☐ Other: _____

Name	Last	First	Middle
Address		Phone #	Email
City	State	Zip	Social Security #

Have you ever filed an application with Wings Xtreme before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give date: _____	
Do any of your friends or relatives, other than a spouse work here?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give name, relationship and position: _____	
Have you ever been employed with Wings Xtreme before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give date and position: _____	
Are you at least 18 years of age?	<input type="checkbox"/> Yes
<input type="checkbox"/> No	
If you are under 18 years of age, can you provide proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a US citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not a US citizen, do you have proof of your legal right to accept employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, may we contact your current employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you travel if a job requires it?	<input type="checkbox"/> Yes
<input type="checkbox"/> No	
Will you work overtime?	<input type="checkbox"/> Yes
<input type="checkbox"/> No	
Have you ever been convicted of a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give date and reason for conviction: _____	
<small>(All positions at Wings Xtreme are subject to a Criminal Background Check.)</small>	
Date available for work: _____	
What is your desired salary range? _____	
Please check your availability to work:	
<input type="checkbox"/> Regular Full-Time	<input type="checkbox"/> Regular Part-Time at ____ hours/week
<input type="checkbox"/> Temp/Seasonal Full-Time	<input type="checkbox"/> Temp/Seasonal Part-Time at ____ hours/week
<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoons
<input type="checkbox"/> Evenings	<input type="checkbox"/> Weekends
<input type="checkbox"/> Sundays	

Education & Training

School	Name, City & State of School	Course of Study	# years	Diploma/Degree
High School				Yes No
Undergraduate School				Yes No
Graduate School				Yes No
Other (Specify)				Yes No

Please state any additional information and skills you feel may be helpful to us in considering your application: _____

Work Experience – Complete this section even if you are attaching a resume

Begin with your current or last job. Include any job-related military service assignments and volunteer activities. You may exclude any organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer:	Dates Employed		Work performed/Responsibilities:
	From:	To:	
Address:	Hourly/Salary Rate		
	Start:	End:	
Supervisor & Telephone #			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title			Reason for leaving:
Employer:	Dates Employed		Work performed/Responsibilities:
	From:	To:	
Address:	Hourly/Salary Rate		
	Start:	End:	
Supervisor & Telephone #			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title			Reason for leaving:
Employer:	Dates Employed		Work performed/Responsibilities:
	From:	To:	
Address:	Hourly/Salary Rate		
	Start:	End:	
Supervisor & Telephone #			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title			Reason for leaving:

Professional & Personal References – Please do not include family members or past supervisors

Name	Address & Phone Number	Occupation
1.		
2.		
3.		

Applicant's Certification – Please read this carefully before signing the application!

- Wings Xtreme is an equal opportunity employer and will consider applicants for all positions without regard to race, age, color, religion, marital status, nation origin, disability, veteran status or any other legally protected status.
- No applicant will be rejected as a result of any impairment, which, with reasonable accommodation, does not prevent performance of the work.
- Wings Xtreme will not tolerate sexual harassment or harassment on the basis of any protected class status in the workplace.
- I understand that, if selected, I will be required to provide proof of my identity and legal right to work in the United States prior to actual employment at Wings Xtreme
- I certify that I have answered truthfully and have not knowingly withheld information relative to my application. I understand that any misrepresentation or material omission on the application will result in my being eliminated from further consideration. I further understand that, if accepted for employment, any misrepresentation or material omission that becomes known to Wings Xtreme may result in immediate termination of my employment.
- I hereby authorize all previous employers and supervisors, including all persons with and for whom I have worked, to give Wings Xtreme's representative's any and all information regarding me and my previous employment. I release Wings Xtreme and all previous employers and supervisors from liability for any damages that may result from furnishing information to Wings Xtreme.
- In consideration of my employment, I agree to adhere to all existing and future instructions, rules and policies of Wings Xtreme. I also understand that Wings Xtreme reserves the right to change wages, hours and working conditions as deemed necessary and that no representative of Wings Xtreme has any authority to enter into any agreement for employment for any specified period or to make any agreement contrary to the foregoing.
- I understand that all employees of Wings Xtreme, with respect to length of employment, are considered to be "at will." This means that I may terminate my employment with OMSI at any time, without notice, without liability, for any extended period. Similarly, Wings Xtreme may terminate my employment with Wings Xtreme at any time without notice, without liability, for any extended period. There is no guaranteed length of employment for any employee. Similarly, any representation by any agent or employee of Wings Xtreme to the contrary is not authorized or binding upon Wings Xtreme unless in writing and signed by the President of Wings Xtreme.

I have read and reviewed the above certification statements and other information provided on the application.

Applicants Signature: _____ Date: _____