



**AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT
PROTEIN GRILL, A DIVISION OF SILVERGREENS LLC**

**In order for you to be considered for employment, the application must be filled out in its ENTIRETY.
Please attach a resume to this completed application**

Today's Date: _____
Month / Day / Year

Name: _____
First Middle Last

Telephone Number: _____ Email Address: _____

Address: _____
Street City State Zip

Are you legally able to work in United States ? Yes No (Proof of identity and legal authority to work in U.S. is a condition of employment.)

For what position are you applying for:
 Prep/Cook Counter-Server Cashier Management

Have you previously been employed by or involved with Silvergreens LLC ? Yes No

EDUCATION

Type of School	Name of School	Location of School	Major/Minor	Last Year Completed	Diploma/Degree	Grade Average
High School				1 2 3 4	Yes No	
College				1 2 3 4	Yes No	
Other				1 2 3 4	Yes No	

List any extra-curricular activities, hobbies, academic awards, honor societies, etc.

WORK SCHEDULE AVAILABILITY

Desired number of hours per week: _____ Date available for employment: _____
 Please fill in hours you are **not available to work**. Depending on position, shifts can vary from 9:00am to 10:00pm.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

WORK EXPERIENCE: Begin with your most recent employer first.

From	To	Employer	Phone:
Hourly Rate/Salary:		Address:	
Job Title:		Nature of Work Performed/Job Responsibilities:	
Supervisor:		Reason for leaving:	
May we contact for reference: <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Please Explain:	

From	To	Employer	Phone:
Hourly Rate/Salary:		Address:	
Job Title:		Nature of Work Performed/Job Responsibilities:	
Supervisor:		Reason for leaving:	
May we contact for reference: <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Please Explain:	

From	To	Employer	Phone:
Hourly Rate/Salary:		Address:	
Job Title:		Nature of Work Performed/Job Responsibilities:	
Supervisor:		Reason for leaving:	
May we contact for reference: <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Please Explain:	

PROFESSIONAL REFERENCES: Please list AT LEAST THREE professional references excluding family and friends.

Name	Phone Number	Relationship	Years Known

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information given in this application and resume is true and complete to the best of my knowledge and that I have not knowingly omitted any information that may impact the employment decision. I understand that the information may be verified by the Company, and I hereby authorize investigation of all statements contained in this application for employment, contact of references, and I hereby release my present employer and past employers from all liability and damages arising from the release of any and all information regarding my employment. If I am employed, in consideration of my employment, I agree to abide by all rules and policies of the Company, I also agree that the duration of my employment will not be for any specific term and may be terminated by me at will or at the will of the Company, with or without cause, and with or without notice, at any time.

SIGNATURE OF APPLICANT: _____ DATE: _____