

IS AN EQUAL OPPORTUNITY EMP

www.buffalowildwings.com

**OUR BENEFITS INCLUDE** 

■ Growth Potential

■ Great Atmosphere	■ High Energy Level		inemplant to sate		
■ Community Connection	■ Team Orientated				
JOB HIGHLIGHTS					
and the ability to work well unde <b>Kitchen Staff</b> Requires attent	nsistent movement, responsiveness to guest or pressure. Responsible service of alcoholion to detail, commitment to standards, co y lifting and hot working conditions.	ol and some heavy lifting	may be required.		
TELL US ABOUT YOURSEL					
Last Name	First Name	Midd	e Name		
Address (Street)	Apt/P.O.				
City	State	Zip	Zip Code		
Day Phone Number ()_	Evening Phone Number ()				
Today's Date	vailable Start Date	Weekly Pay Desired \$			
How were you referred to Buff	alo Wild Wings?				
☐ In-Store Signage ☐ Internet ☐ No	ews Ad 🗆 Walk İn 🗇 Employee Referral (	by)	Other		
Are you 16 years or older?	es □ No				
Are you 18 years or older?	es □ No	NUMBER OF STREET			
	vork in the U.S.? ☐ Yes ☐ No				
Have you ever applied or work	xed at a Buffalo Wild Wings? 🗆 Yes	s 🗆 No			

■ Flexible Schedule

## WHAT JOBS ARE YOU APPLYING FOR? (Check all that apply)

□ Server

If yes, where and when?

- □ Bartender
- ☐ Kitchen Staff ☐ Cashier

☐ Some High School ☐ High School Graduate/GED ☐ Some College

## HOURS CAN YOU WORK? (Fill in all available work hours)

٨	Nonday
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Tuesday

Check the highest education level attained.

Wednesday

Thursday

Friday

Saturday

☐ BS/BA Degree ☐ Other

Sunday

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TELL US ABOUT YOU (List your last three employers sta	arting with the most	recent, if you have add	ditional wo	k experier	nce prior to the last t	hree employers within the past 10
years, attach a separate sheet of	t paper with addition	onal intormation. <b>Resun</b>	ies cannot b	e substitut	ed for completing this	employment record.)
Company Name (Nature of Business)						
City/State						
Phone						
Job Title						
<b>Primary Job Duties</b>						
Supervisor's Name				1 7,97		
Dates of Employment (Month & Year)	From: MM / YY	To:	From:	MM/YY	To:	From: To: MM/YY MM/YY
Last Rate of Pay		×				
Hours Worked/Week						And the state of the state of
Reason for Leaving		ilganiya Turkari	1.441			
Eligible for Rehire?	☐ Yes	□ No		☐ Yes	□No	☐ Yes ☐ No
May We Contact for Reference?	☐ Yes	□No		☐ Yes	□No	☐ Yes ☐ No
<ol> <li>Have you been convicted does not necessarily means of the second of the s</li></ol>	n you will be der	nied employment.) [	Yes 🗆 No	)		nswering yes to this question
3. Within the past 5 years, he lf yes, please explain on a			ed or aske	d to resiç	gn from any job? (	JYes □No
4. For the purpose of verifyir any of the organizations I lf yes, please specify name	ng information or listed? □ Yes □ N ne	n this application, ho lo	ave you e	ver worke	ed or attended sch	ool under a different name at
PLEASE READ GARI I hereby certify that the information previous employers and all others information from any liability resurn any information requested. I under	on given by me is true for the purpose of the liting from the inform	ue and complete in all reverification of the information released. I autho	nation I hav rize employ	e supplied ers, schoo	. I release SC Wings ls, and other persons	Brea and all those providing named on this application to provide
Employment with SC Wings Brea United States.	is also contingent o	n my providing sufficier	nt document	ation nece	ssary to establish my	identity and eligibility to work in the
	plication is not a co	ntract or employment be	etween SC \	Wings Bred	a and I. No words or	otice, at any time at my option or the actions of the Company, including ent contract.
My signature is evidence that I ha	ive read and agree	with the above stateme	nts.			

Signature:

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