

APPLICATION FOR EMPLOYMENT

questions? e-mail us at info@saguarompls.com

date: _____

personal information LAST NAME		FIRST NAME		MIDDLE INITIAL	SOCIAL SECURITY #	SOCIAL SECURITY #	
HOME ADDRESS				CITY	STATE	ZIP	
DME PHONE		ALTERNATE PHONE (work or cell)		E-MAIL	ADDRESS		
ARE YOU AT LEAST 18 YEARS OLD? Yes No if no, are you over 16?		DATE AVAILABLE TO START / / day mo. yr.		_ ARE YC	ARE YOU A U.S. CITIZEN? Yes No		
DAYS AND HOURS AVAILABL	.E	uuy me	,. y				
Mon	Tue Wed	Thu Fri	Sat Su		ARE YOU INTERESTED IN (check all that apply) Full-time Part-time		
From:					─ WHAT TYPE OF POSITION ARE YOU LOOKING FOR? ☐ Server/FOH ☐ Cook/Kitchen		
education	NAME O LOCAT	ION OF COURCE			" OF VEARS ATTENDED	CDADUATED	
HIGH SCHOOL	NAME & LOCAT	ION OF SCHOOL	City	State	# OF YEARS ATTENDED	GRADUATED?	
COLLEGE	Name of school		City	State		Yes No	
GRADUATE SCHOOL	Name of school		City	State		Yes No	
OTHER	Name of school		City	State		Yes No	
		ing at sagua	ro?				

Saguaro/Sito One, LLC is an equal opportunity employer.

Various federal, state and local laws prohibit discrimination based on race, color, gender, religion, national origin, ancestry, disability or marital status. The information provided in this application will be used solely to evaluate the applicant's qualifications for the position being sought. no reposnse to any question contained in this application will be used as a basis for illegal discrimination.



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employment history									
List your past employm of your activities during	ent positions <u>starting with the</u> that period. If you would prefe	most recent. Please account for any tier that we not contact any of your pas	ime period during which you w it employers, please indicate th	ere unemployed by de at preference by check	scribing the nature ing the box provided.				
DATES	NAME AND ADDRESS OF EMPLOYER		POSITION HELD	SALARY/WAGES	REASON FOR LEAVING				
From:	Name								
/ mo. yr.	Address	City							
To:	, addeds	city							
/	State	Phone #			please do not contact				
mo. yr. From:	Name				this employer				
/									
mo. yr.	Address	City							
То:	State	Phone #							
					please do not contact this employer				
From:	Name								
/ mo. yr.	Address	City							
To:	Address	city							
/	State	Phone #			please do not contact				
mo. yr.	Name				this employer				
From:	Nume								
mo. yr.	Address	City							
То:	6.1	DI "							
/ mo. yr.	State	Phone #			please do not contact this employer				
·	l .				ausemployer				
references									
Please list at least two (2	2) business or personal referenc	res		1					
NAME & RELATIONSHIP		ADDRESS	ADDRESS		PHONE NUMBER				
please read ca	rofully								
information on this app By signing below, I auth	lication, regardless of when tha orize Saguaro to conduct such	on this application are true and comp at information is discovered, may be g investigations as it deems appropriat of ormation provided in such investiga	rounds for disciplinary action u e into my employment history,	p to and including terr	nination if I am hired.				
		e "at will", meaning that either I or Sag pplication by Saguaro does not imply							
APPLICANT'S SIGNATU	RE:		DATE:						

Please return your completed and signed application to Saguaro at: info@saguarompls.com











