



Indian Ranch Main Office - 200 Gore Road, Webster MA 01570 [www.IndianRanch.com](http://www.IndianRanch.com) -Tel: 508-943-3871  
Samuel Slater's Restaurant - [www.SamuelSlaters.com](http://www.SamuelSlaters.com) - Tel: 508-943-1639

## Application for Employment

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

### APPLICANT INFORMATION

Today's Date: \_\_\_\_\_

Last Name:	First Name:	Middle:
Street Address:	Apt #	
City:	State:	Zip:
Home Phone:	Cell Phone:	
E-mail Address:		
Social Security #	If under 18, please list age:	
Position Applied For:	Days/Hours you are available to work	
Date Available:	No Preference _____	Thursday _____
Desired Salary/Hourly Pay:	Monday _____	Friday _____
How many hours can you work weekly?	Tuesday _____	Saturday _____
Can you work nights?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Wednesday _____ Sunday _____
Can you work weekends?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain:
Do you have a valid driver's License?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
What is your means of transportation to work?		
Have you ever been in the armed forces?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes: From: _____ To: _____
Are you a member of the National Guard?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, Specialty?

### EDUCATION

HIGH SCHOOL	Name of School:
	Address:
From: _____ To: _____	Did you Graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/>
COLLEGE	Name of College:
	Address:
From: _____ To: _____	Did you Graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Major & Degree
BUSINESS OR TRADE SCHOOL	Name of School:
	Address:
From: _____ To: _____	Did you Graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Major & Degree
PROFESSIONAL SCHOOL	Name of School:
	Address:
From: _____ To: _____	Did you Graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Major & Degree

**REFERENCES**

*Please list two professional references other than relatives or previous employers*

Name:	Name:
Company:	Company:
Address:	Address:
Telephone:	Telephone:
E-Mail:	E-Mail:

**PREVIOUS EMPLOYMENT**

Company:	Phone:	
Address:	Supervisor:	
	Starting Salary \$	
Job Title:	Ending Salary \$	
Responsibilities		
From:	To:	Reason for leaving?
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Company:	Phone:	
Address:	Supervisor:	
	Starting Salary \$	
Job Title:	Ending Salary \$	
Responsibilities		
From:	To:	Reason for leaving?
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Company:	Phone:	
Address:	Supervisor:	
	Starting Salary \$	
Job Title:	Ending Salary \$	
Responsibilities		
From:	To:	Reason for leaving?
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

**DISCLAIMER AND SIGNATURE**

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_