



**PERSONAL INFORMATION**

<p><b>Are you Authorized to Work in the U.S.A ?</b>    Y <input type="checkbox"/>    N <input type="checkbox"/></p> <p>Proof of work authorization, required for I-9 purposes, must be produced by the employee within 72 hours of the start of the employee's employment.</p>	<p><b>Are you certified in the Responsible Service of Alcohol?</b></p> <p>Y <input type="checkbox"/>    N <input type="checkbox"/></p>
<p>If you are under 18 years of age, can you furnish a work permit?</p>	<p>If yes—what program?                  ServeSafe Barcode                  TIPS                  Other</p>
<p><b>Have you ever been convicted of a crime?</b>    Y <input type="checkbox"/>    N <input type="checkbox"/></p> <p>(Massachusetts applicants should not include misdemeanor convictions;)                  If yes, what crime and where?</p> <p>(NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)</p>	<p>When does your certification expire?</p>
<p><b>If hired –do you have reliable transportation to get to work?</b>    Y <input type="checkbox"/>    N <input type="checkbox"/></p> <p>Describe:</p>	
<p>Have you ever been discharged or asked to resign from any position? _____ If yes, please describe: _____</p>	
<p>List any friends or relatives employed by this company: _____</p>	

**Service & Hospitality**

Define what Hospitality means to you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you want to work for O'Connor's ? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Rate yourself:**  
 On a scale of 1-10 please rate your proficiency/ability in each of the following skills:

Food Knowledge_____	Plate Carrying Ability_____	Tray Carrying ability_____
Wine Knowledge_____	Wine Service_____	Beverage Knowledge_____
Problem Solving _____	Stamina_____	Team Player _____
Ability to work under pressure_____		POS Knowledge_____

**Please indicate any other skills you have that may be relevant to the position for which you are applying:**

\_\_\_\_\_

**Release for Contacting References**

I hereby authorize O'Connor's Restaurant and Bar to contact any of the above references. I further authorize references to release any information concerning me as they deem appropriate. I release and forever discharge O'Connor's Restaurant and Bar, its agents or employees, and the above-mentioned references, their agents or employees, from any and all liability, suits or causes of action arising in any manner from O'Connor's Restaurant and Bar contacting such references. *I understand that this Release prevents me from instituting any claim, lawsuit or other legal action based on any information any reference provides to O'Connor's Restaurant and Bar.*

*Applicant Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**By submitting this application, I certify that all statements given on this application are correct, and realize that falsification of this or another personal record may result in my discharge.**

*Applicant Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

Emergency Contact (& Relationship): \_\_\_\_\_ Phone \_\_\_\_\_