



# Application for Employment

## Personal Information

Name (Last, First, Middle)		Date:
Present Address (Street, City, State, Zip)		
Permanent Address (Street, City, State, Zip)		
Phone Number (Area Code)	Email:	
State Name and Relationship of any Relatives in our Employ	Referred By:	

## Employment Desired

Position:								
Date You Can Start:				Are You Now Employed?				
May We Contact Your Current Employer?				Have You Previously Worked Here?				
Schedule Availability?		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Please list time availability in the morning and afternoon each day.	AM							
	PM							

## Education History

Name & Location of High School:		Graduation:
Name & Location of College:		Years Attended:
Degree(s) Completed:		Other Subjects Studied:
Trade, Business or Correspondence School:		Years Attended:
Subjects Studied:		Graduation:
Summarize your Special Skills and/or Qualifications:		

**Former Employers:**

Date, Month & Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From:		\$		
To:		Per:		
From:		\$		
To:		Per:		
From:		\$		
To:		Per:		

**References:**

Give the Names of Three Persons not Related to You, Whom You Have Known At least One Year.

Name:	Address	Business	Years
1.			
2.			
3.			

**Emergency Contact:**

In Case of Emergency Notify:	Phone:	Address:
------------------------------	--------	----------

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, be terminated at any time without any previous notice. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the American with Disabilities Act (ADA) and other relevant federal and state laws"

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Please return your completed application via email or USPS to the addresses listed below.

Thank You for your interest in working with us.

Mailing Address

The Gin and Granary  
PO Box 171  
Wall, Texas 76957

Email Address

[info@ginandgranary.com](mailto:info@ginandgranary.com)