Brick House Cajun Cuisine 2107 BAGNELL DAM BOULEVARD LAKE OZARK, MO 65049 PHONE: 573.693.9775



APPLICANT INFORMATION								
Last Name			First			Date		
Street Address					Apartment/Unit #			
City			State			ZIP		
Phone			E-mail Address					
Date Available	Social Secu	cial Security No. Des			sired Salary			
Position Applied for								
Are you a citizen of the United States?	YES 🗌 N	10	If no, are you authorized	l to w	ork in the U.S	S.? YES	NO 🗌	
Have you ever worked for this company?	YES 🗌 N	10	If so, when?					
Have you ever been convicted of a felony?	YES 🗌 N	10	If yes, explain					

EDUCATION					
High School			Address		
From	То	Did you graduate?	YES	NO 🗌	Degree
College			Address		
From	То	Did you graduate?	YES	NO 🗌	Degree
Other			Address		
From	То	Did you graduate?	YES	NO 🗌	Degree

REFERENCES				
Please list three professional references.				
Full Name	Relationship			
Company	Phone ()			
Address				
Full Name	Relationship			
Company	Phone ()			
Address				
Full Name	Relationship			
Company	Phone ()			
Address				

PREVIOUS EM	PLOYMENT						
Company			Phone ()				
Address			Supervisor				
Job Title Starting Salary			\$		Ending Salary	\$	
Responsibilities							
From	То	Reason for Leaving]				
May we contact your previous supervisor for a reference? YES			NO 🗌	NO 🗌			
Company			Phone ()				
Address			Supervisor				
Job Title			Starting Salary	\$		Ending Salary	\$
Responsibilities							
From	То	Reason for Leaving]				
May we contact your previous supervisor for a reference? YES NO							
Company			Phone ()			
Address			Supervisor				
Job Title			Starting Salary	\$		Ending Salary	\$
Responsibilities							
From	То	Reason for Leaving]				
May we contact your previous supervisor for a reference? YES NO							

MILITARY SERVICE						
Branch	From To					
Rank at Discharge	Type of Discharge					
If other than honorable, explain						

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

Voluntary Applicant Survey

As an affirmative action employer, we are required to record the demographics of our applicants. This information does not influence decision making relating to any employment matter, and we appreciate your cooperation in providing this information.

Position applied for:	Date:

Voluntary Self-Identification

Sex: (Please check one):

Male Female

Please indicate the race/ethnic group with which you identify:

Hispanic or Latino – all persons of Mexican, Puerto Rican, Cuban, Central or South American, or South American, or other Spanish culture or origin, regardless of race (if you have selected this category, it is not necessary to select from the racial groups, found below).



Non-Hispanic/Latino (if this category is checked, please select from the racial groups found below).

Racial Groups: If Non-Hispanic/Latino was selected above, please check one of the below race categories:

White (Not Hispanic or Latino) – All person having origins in any of the original people of Europe, North Africa, or the Middle East

Black or African American (Not of Hispanic origin) – All persons having origins in any of the black racial groups of Africa

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – Any persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands

Asian (Not Hispanic or Latino) – All persons having origins in any of the original peo ples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Island, Thailand, and Vietnam

American Indian or Alaskan Native (Not Hispanic or Latino) – All persons having ori gins in any of the original peoples of North or South America, and who maintain cultural identification through tribal affiliation or community attachment

Two or More Races (Not Hispanic or Latino) – all persons who identify with more than one of the above races

Decline Self Identification: If you do not wish to self identify your gender, ethnicity or race please check this box:



I do not wish to self identify

Referral Source

How did you hear about this job opportunity?

Thank you

This information is submitted voluntarily, will be kept confidential, will be exclusively utilized for EEO statistical gathering and compliance purposes, and will not influence the application or hiring process.