

### **Employment Application**























#### Join Our Team! =

The bars and restaurants operated by Full Court Press Inc. need talented employees to keep the success going and growing. We offer entry-level and advanced positions in every area of restaurant and bar operation.

Please click the submit button on page 3 to email your completed application to employment@fullcourtpressdm.com, or mail to:

Full Court Press (Attn. Employment) 200 SW 2nd St., Des Moines, IA 50309

## **Personal Information**

Name				
FIRST		LAST		
Present Address				
STREET ADDRESS		CITY	STATE	
ADDRESS LINE 2		ZIP CODE		
Permanent Address				
STREET ADDRESS		CITY	STATE	
ADDRESS LINE 2		ZIP CODE		
Phone	Alternate Phone	Have you ever been convicted of a felony?  □ YES □ NO		
When is the best time to reach you? Are you 19 years or older?  ☐ MORNING ☐ AFTERNOON ☐ EVENING ☐ YES ☐ NO		If yes to the above, please explain (this will not exclude you).		
Desired Employmen	t			
Position Desired (check all that	at apply)  ☐ Busser ☐ Asst. Manager	☐ Bartender ☐ Expedit	er 🔲 Prep Cook 🔲 Dishwasher	
Establishment Desired (check  Buzzard Billy's	☐ Fong's Pizza DSM ☐ Fong's Pizza Anke		☐ Hessen Haus ☐ High Life Lounge versity Library Cafe ☐ NO PREFERENCE	
Please list the hours you are	available to work each week			
Mon am to am pm	Tues. am to am pm	<b>Wed.</b> am to :	Thurs. am to am pm	
Fri. am to am pm	Satamamampm	Sun am to am	am om	
Have you ever applied to this company before?  □ YES □ NO		Have you ever worked for this company before?  □ YES □ NO		
Former Employers List below your last three employers, st	arting with most recent.			
Employer 1		,		
COMPANY NAME		FROM TO	STARTING PAY ENDING PAY	
STREET ADDRESS		SUPERVISOR	PHONE	
ADDRESS LINE 2		JOB TITLE REASON FOR LEAVING		
OTTV CTATE 7ID CODE		DITIES		



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Employer 2				Ċ	Ċ
COMPANY NAME			FROM TO	\$ STARTING PAY	ENDING PAY
STREET ADDRESS			SUPERVISOR	PHONE	
ADDRESS LINE 2		JOB TITLE	REASON FOR LEAV	REASON FOR LEAVING	
CITY	STATE	ZIP CODE	DUTIES		
Employer 3				ć	\$
COMPANY NAME			FROM TO	STARTING PAY	ENDING PAY
STREET ADDRESS			SUPERVISOR	PHONE	
ADDRESS LINE 2			JOB TITLE	REASON FOR LEAV	ING
CITY	STATE	ZIP CODE	DUTIES		
Education					
Education					
High School					
SCHOOL NAME					
SCHOOL ADDRESS			SUBJECTS	Craduatada	
ADDRESS LINE 2			NUMBER OF YEARS ATTENDED	Graduated? □ YES □ NO	
CITY	STATE	ZIP CODE			
College					
SCHOOL NAME					
SCHOOL ADDRESS			SUBJECTS	0 d t - 10	
ADDRESS LINE 2			NUMBER OF YEARS ATTENDED	Graduated? □ YES □ NO	
CITY	STATE	ZIP CODE			
Other Education					
SCHOOL NAME					
SCHOOL ADDRESS			SUBJECTS		
ADDRESS LINE 2			NUMBER OF YEARS ATTENDED	Graduated? □ YES □ NO	
CITY	STATE	ZIP CODE			



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# **References**

Reference 1						
REFERENCE NAME REFERENCE ADDRESS			BUSINESS	BUSINESS		
			PHONE	YEARS KNOWN		
ADDRESS LINE 2						
CITY	STATE	ZIP CODE				
Reference 2						
REFERENCE NAME			BUSINESS			
REFERENCE ADDRESS			PHONE	YEARS KNOWN		
ADDRESS LINE 2						
CITY	STATE	ZIP CODE				
Reference 3						
REFERENCE NAME			BUSINESS			
REFERENCE ADDRESS			PHONE	YEARS KNOWN		
ADDRESS LINE 2						
CITY	STATE	ZIP CODE				
Please read	d and complet	te form below:				
"By typing my na	me below, I certify th	nat the facts contained in	this application are true and ication shall be grounds for t	complete to the best of my knowledge and ermination.		
information conc	erning my previous e	employment and any perti		ers listed above to give you any and all ave, personal or otherwise and release the on.		
	riod of time, or to ma			ter into any agreement for employment for is in writing and signed by an authorized		
NAME.						

