

**JOIN OUR TEAM**

The bars and restaurants operated by Full Court Press Inc. need talented managers to keep the success going and growing. We offer entry-level and advanced positions with a competitive benefits package to include employee discounts, health insurance premium contributions, 401k and 4% matching, paid holidays, paid vacation/sick days, and more!

To apply, please fill out the below application and email it to Kelly at [hr@fullcourtpressdm.com](mailto:hr@fullcourtpressdm.com).

**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

When is the best time to reach you?  MORNING  AFTERNOON  EVENING

Are you 19 years or older?  YES  NO

Have you ever been convicted of a felony?  YES  NO

If yes to the above, please explain (*this will not exclude you*).

\_\_\_\_\_

\_\_\_\_\_

**AVAILABILITY AND EXPERIENCE INFORMATION**

Position Desired (*check all that apply*)  GENERAL MANAGER  ASSISTANT MANAGER  KITCHEN MANAGER

Please list the hours you are available to work each week

Mon. \_\_\_\_\_ am to \_\_\_\_\_ am    Tues. \_\_\_\_\_ am to \_\_\_\_\_ am    Wed. \_\_\_\_\_ am to \_\_\_\_\_ am    Thur. \_\_\_\_\_ am to \_\_\_\_\_ am

Fri. \_\_\_\_\_ am to \_\_\_\_\_ am    Sat. \_\_\_\_\_ am to \_\_\_\_\_ am    Sun. \_\_\_\_\_ am to \_\_\_\_\_ am

Have you ever applied to this company before?  YES  NO    Have you ever worked for this company before?  YES  NO

How many years of restaurant experience do you have? \_\_\_\_\_    How many years of management experience do you have? \_\_\_\_\_

Briefly describe the computer and/or Point of Sale (POS) software programs you have experience with.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FORMER EMPLOYERS**

List below your last three employers starting 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	
_____ CITY	_____ STATE	_____ ZIP CODE	_____ DUTIES			

**Employer 2**

_____ COMPANY NAME			_____/_____ FROM	_____/_____ TO	\$ _____ STARTING PAY	\$ _____ ENDING PAY
_____ STREET ADDRESS			_____ SUPERVISOR		_____ PHONE	
_____ ADDRESS LINE 2			_____ JOB TITLE		_____ REASON FOR LEAVING	
_____ CITY	_____ STATE	_____ ZIP CODE	_____ DUTIES			

**Employer 3**

_____ COMPANY NAME			_____/_____ FROM	_____/_____ TO	\$ _____ STARTING PAY	\$ _____ ENDING PAY
_____ STREET ADDRESS			_____ SUPERVISOR		_____ PHONE	
_____ ADDRESS LINE 2			_____ JOB TITLE		_____ REASON FOR LEAVING	
_____ CITY	_____ STATE	_____ ZIP CODE	_____ DUTIES			

**Employer 4**

_____ COMPANY NAME			_____/_____ FROM	_____/_____ TO	\$ _____ STARTING PAY	\$ _____ ENDING PAY
_____ STREET ADDRESS			_____ SUPERVISOR		_____ PHONE	
_____ ADDRESS LINE 2			_____ JOB TITLE		_____ REASON FOR LEAVING	
_____ CITY	_____ STATE	_____ ZIP CODE	_____ DUTIES			

**EDUCATION**

High School

SCHOOL NAME

SUBJECTS

SCHOOL ADDRESS

NUMBER OF YEARS ATTENDED

CITY STATE ZIP CODE

Graduated?  YES  NO

College

SCHOOL NAME

SUBJECTS

SCHOOL ADDRESS

NUMBER OF YEARS ATTENDED

CITY STATE ZIP CODE

Graduated?  YES  NO

**REFERENCES**

Reference 1

REFERENCE NAME

BUSINESS

REFERENCE ADDRESS

PHONE YEARS KNOWN

CITY STATE ZIP CODE

Reference 2

REFERENCE NAME

BUSINESS

REFERENCE ADDRESS

PHONE YEARS KNOWN

CITY STATE ZIP CODE

**ACKNOWLEDGMENT**

“By signing my name below, 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 termination.

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.”

NAME DATE