



APPLICATION FOR EMPLOYMENT

Today's Date:	Are yo	u 18 years or olde	r? 🗌 Yes 🗌 No
Please check the bo	x next to any position	s that you are a	oplying for:
Kitchen Food Runner	Busser Hostess	Server Par	king Lot 🔄 Gift Shop
Name			
Last	First		Middle
Current Address			
Street Number	Street Name	City/State	Zip
Phone Number	Email	Address	
The state of Florida only hires U.S. o provide identification and either pr	•		•
1. Are you a U.S. Citizen?			Yes No
2. If no, are you legally authorize hiring authority to which you	,	ent with the speci	fiC Yes No

Have you ever worked for Pineapple Willy's or The Wicked Wheel before? If yes, please give dates and position: ____

Do you have any friends or relatives currently working at Pineapple Willy's or The Wicked Wheel? If yes, name: ______ Relationship: _____

Have you ever pled guilty or "no contest" to a crime, been convicted of a crime, had adjudication

withheld, or prosecution deferred? Yes No

Please check the box next to any shifts you are available to work:

Days Only Nights Only Day or Night Full Availability

This position may be seasonal, usually ending in October. Do you have any scheduling conflicts that would affect your ability to appear at work? If yes, please explain: ______

Do you have any experience in the position that you are applying for? If yes, please explain:

Are you currently employed? Yes	No Last employer:	
Do you have a reference?		
Name	9	Phone Number

After submitting this application, we will conduct a brief interview with you, if time permits. If you do not hear from us within a week, then all positions have been filled. We will keep your application for future consideration. Thank you for applying with Pineapple Willy's, Inc.

I HEREBY CERTIFY that all of the information that I have provided in this appliction is true and accurate.

Date

Signature of Applicant

This company is an equal opportunity employer and does not discriminate because of race, color, religion, sex, age, citizenship, marital status, gender identity or expression, sexual orientation, disability, or nation origin.

Equal Opportunity Employer Applicant's Statement

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 60-day introductory period, and that termination for unsatisfactory performance during that period will not result in any Company responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing this application, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the Company may obtain a consumer report or reports on me. I authorize this Company to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, Department of Motor Vehicle reports, and investigative consumer reports. I authorize the Company to conduct electronic inquiry related to my background, including review of all social networking sites and Internet sites and to make adverse decisions as a result of such inquiries. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

This application was received by:	Date:
Was the applicant interviewed? Yes No	