

Employment Application



The Station Pub & Event Center
2171 Fourth Street
White Bear Lake, MN 55110
Phone: 651-426-2300
www.thestationwbl.com

Today's Date:

Name:

Address:

State/Province:

Zip/Postal Code:

Phone:

Email:

Positions Applied for:

Salary/Wage Desired:

☐ Full-Time ☐ Part-time ☐ Full or part-time

Hours Available to Work:

Mon

Tues

Wed

Thurs

Fri

Sat

Sun

When are you available to begin work?

Why Are You Seeking Employment at
The Station Pub & Event Center?

How did you hear about this opportunity at
The Station?

☐ Employee ☐ Walk-In
☐ Relative ☐ Other

Other:

Education

Type of School	Name of School, City & State	No. Years Completed	Major or Degree
High School			
College Bus. or Trade School			
Professional School			
Other			

Are you at least 18 years old?

☐ yes ☐ no

If you are under 18 years of age, can you provide a valid work permit?

☐ yes ☐ no

Have you ever been convicted of a crime:

☐ yes ☐ no

If yes, please explain

Do you have a drivers license?

☐ yes ☐ no

State of issue:

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Continue on the next page

Previous Employment (list up to 3)

1.

Name of Employer: _____

Name of last supervisor: _____

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address: _____

Phone #: _____

Last job title: _____

Reason for Leaving (be specific): _____

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer:

☐ yes ☐ no

2.

Name of Employer: _____

Name of last supervisor: _____

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address: _____

Phone #: _____

Last job title: _____

Reason for Leaving (be specific): _____

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer:

☐ yes ☐ no

Continue on the next page

3.

Name of Employer: _____

Name of last supervisor: _____

Dates of employment:

From: To:

Salary:

From: To:

Complete Address: _____

Phone #: _____

Last job title: _____

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: ☐ yes ☐ no

Please list 2 references other than relatives and previous employers

Name		
Position		
Company		
Telephone		
E-Mail		

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying:

Authorizations & At-Will Employment Agreement

(please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify The Station (this company) management if I should be convicted of a crime while my job application is pending or during my employment, if hired. I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge. I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company. Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer. I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations. I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature _____ Date ____/____/____

Name (please print) _____