

**LAKE BURGER**  
**29475 MILL CREEK MARINA RD**  
**GRAVOIS MILLS MO 65037**

Send application to:  
 Lake Burger  
 c/o Coconuts At The Lake  
 15208 Red Hollow Rd  
 Gravois Mills MO 65037  
**No Phone Calls**

**APPLICATION FOR EMPLOYMENT**

In order to be considered for employment, this application must be COMPLETELY filled out

**General**

PLEASE PRINT

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
First Last

Present Address: \_\_\_\_\_  
Street City State Zip

Previous Address: \_\_\_\_\_  
Street City State Zip

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Phone \_\_\_\_\_

Are you legally able to work in the United States? Yes \_\_\_ No \_\_\_ (Proof of identity is condition of employment)

Specific Position you are applying for:

- Server  Host  Bartender  Busser/Food Runner  Docks  Manager  Back Office  
 Security  Kitchen Prep  Kitchen Cook  Chef  Maintenance *Expected Hourly Rate* \_\_\_\_\_

Date available for employment: \_\_\_\_\_

Have you ever been convicted of a felony which has not been sealed by a court? \_\_\_\_\_ If Yes explain:

**Work Availability**

Shift	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

**Education**

Type of School	Name of School	Location	Course Major	Last Yr Completed	Diploma? Y or N

## Volunteer & Military Experience

Volunteer Experience: \_\_\_\_\_

US Military Experience: \_\_\_\_\_

## Business Experience

Present Employer:	From/To	Immediate Supervisor
Address		Your Position:
City State Zip	Salary	Reason For Leaving
Previous Employer:	From/To	Immediate Supervisor
Address		Your Position:
City State Zip	Salary	Reason For Leaving
Past Employer:	From/To	Immediate Supervisor
Address		Your Position:
City State Zip	Salary	Reason For Leaving

I AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE. ANY MISREPRESENTATION, FALSE STATEMENT OR OMISSION OF FACTS REQUESTED SHALL BE GROUNDS FOR REFUSAL OF EMPLOYMENT OR IMMEDIATE TERMINATION. I UNDERSTAND IF HIRED THAT ANY VIOLATIONS OF COMPANY RULES, POLICIES OR PROCEDURES SHALL BE GROUNDS FOR TERMINATION OF EMPLOYMENT. I AGREE TO CONFIRM TO THE RULES, REGULATIONS AND POLICIES ESTABLISHED BY THIS EMPLOYER. I UNDERSTAND MY EMPLOYMENT CAN BE TERMINATED WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_