

APPLICATION FORM FOR YELLOWFIN LTD

LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

DATE OF BIRTH: _____ SEX: _____ MARITAL STATUS: _____

NUMBER OF DEPENDENTS: _____ NATIONALITY: _____

PREVIOUS EMPLOYERS:

COMPANY NAME	POSITION HELD	TELEPHONE	TIME OF EMPLOYMENT

PERSONAL REFERENCES: Please list two

Have you ever been convicted of a criminal offence? yes no

Are you willing to work split shifts, weekends, public and bank holidays? yes no

Do you have your own transportation? (Local Applicants only) yes no

yes no

Front of House Staff

Bartender
(Local applicants only)

Chef/Kitchen staff

SIGNATURE OF APPLICANT: _____ DATE: _____