

**APPLICATION FOR EMPLOYMENT**  
**Pre-Employment Questionnaire**  
**An Equal Opportunity Employer**

Tacomania Cantina  
 641 East Kings Hwy  
 Shreveport, LA 71105

**Personal Information**

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.		
PRESENT ADDRESS	APT. NO.	CITY	STATE	ZIP
ARE YOU 18 YEARS OR OLDER? ?YES ? NO		PHONE		

**Desired Employment**

POSITION	DATE YOU CAN START	SALARY DESIRED		
ARE YOU EMPLOYED NOW? ?YES ? NO	IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?		? YES	? NO
EVER APPLIED TO THIS COMPANY BEFORE? ?YES ? NO	WHERE?	WHEN?		
EVER WORKED FOR THIS COMPANY BEFORE? ?YES ? NO	WHERE?	WHEN?		
REASON FOR LEAVING				
NAME OF LAST SUPERVISOR AT THIS COMPANY				
WHO REFERRED YOU TO THIS COMPANY? ? EMPLOYMENT AGENCY ? NEWSPAPER ADVERTISING ? FRIEND				
? STATE EMPLOYMENT AGENCY ? COLLEGE PLACEMENT SERVICE ? WALK IN ? OTHER				

**Education**

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMER SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

**Former Employers**

LIST BELOW LAST TWO EMPLOYERS, STARTING WITH THE MOST RECENT

1. NAME OF PRESENT OR LAST EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE		
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?	? YES	? NO
NAME OF SUPERVISOR	TITLE	PHONE		
DESCRIPTION OF WORK				
REASON FOR LEAVING				
2. NAME OF PRESENT OR LAST EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE		
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?	? YES	? NO
NAME OF SUPERVISOR	TITLE	PHONE		
DESCRIPTION OF WORK				
REASON FOR LEAVING				