horizontal line

Restaurant Application Form Online

**─**

**Applicant Information**

* **Name: (Text Field)**
* **Date of Birth: (Date Picker)**
* **Phone Number: (Text Field)**
* **Email Address: (Email Field)**
* **Address: (Text Area)**

**Position and Availability**

* **Position Applied For: (Dropdown Menu)**
* **Desired Salary: (Number Field)**
* **Availability: ☐ Full-Time ☐ Part-Time ☐ Seasonal**

**Education and Experience**

* **Highest Level of Education: (Dropdown Menu)**
* **School/University: (Text Field)**
* **Previous Restaurant Experience: (Checkbox) ☐ Yes ☐ No**
  + **If yes, please provide details: (Text Area)**

**References**

* **Reference #1 Name: (Text Field)**
* **Relation: (Text Field)**
* **Contact Number: (Text Field)**

**Consent and Confirmation**

* **☐ I consent to background checks as part of the application process.**
* **☐ I certify that the information provided is true and complete.**

**Submit Button**