

Application Form

Position applied for:		Date available to begin work:							
Name:		I							
Phone #:		Email Address:							
Preferred St. Louis location:		Do you have smart serve/first aid/food safety?							
Why?									
Have you ever gone out to a St. Louis?	YES	NO	If YES, which location:						
Tell us about your experiencegood, bad or otherwise:									
Why do you want to work for St. Louis?									
Have you ever entered a wing eating compet	ition?								
How many chicken wings do you think you co	ould eat i	in one s	itting?						
Have you participated in sports or activities?									
Have you participated in theatre or improv?									
When you're not working, what do you enjoy	y doing ir	n your s	pare time?						
What's your favourite movie? Why?									
If you were forced to eat nothing but chicken and why?	wings fo	or the r	est of your lifewhat flavour would you choose						
What are your favourite toppings on a burge	r?								
If you had three wisheswhat would they be	and wh	y?							



Describe why you think you would be a great addition to St. Louis:									
Three characteristics that best describe you:				Three weaknesses?					
What time do you usually get out of bed in the morning?									
Favourite animal:		V	Why?						
Least favourite an	imal:	V	Why?						
Have you been convicted of a criminal offence for which a pardon has not been granted?									
Have you ever done anything that if you had been caught you would most likely have been convicted of a criminal offence? YES NO If YES, what did you do?									
Are you 18 years of age or older? Are you legally entitled to work in Canada?									
What was your favourite subject in school? Why?									
What is your availability									
Mon	Tues	Wed	Thu	irs	Fri	Sat	Sun		
Please Read Carefully I hereby certify that to the best of my knowledge and belief, the answers given by me to the foregoing questions and all statements made by me in this application are correct. I understand that any false information or material omission contained in this application is cause for my immediate dismissal. I understand and accept that should I be granted the position I am applying for, the first 90 days of employment will be considered a probationary period during which time St Louis Bar & Grill can terminate my employment, at its discretion without written notification. I hereby authorize St. Louis Bar & Grill or any of its representatives to verify the information given by me on this application. I agree to complete all required certifications as outlined by St. Louis Bar and Grill within 60 days of the date hired. Information contained in the application and any future personal information obtained by the employer may be shared with its franchisor, St. Louis Franchise Limited, and that by signing the application, the employee so consents to such use or distribution of the information to St. Louis Franchise Limited. Date Signature of Applicant									
Signature of Appli	cant								