

Application for Employment

1216 Parkside Main Street, Cary, NC 27519

www.wokonfirertp.com

Phone: 919-4660777 / 919-4660888

Position you are Applying for			Desired Salary		
Date Available for W	/ork				
Delivery of Food from Kitchen ☐ Front of the restaurant ☐					
Check if interested to work during appropriate shifts (Tuesdays Holiday)					
Morning Shift (11:00am to 3:00am) Mon \Box Wed \Box Thru \Box Fri \Box Sat \Box Sun \Box					
Evening Shift (4:30pm to 10:30pm) Mon \square Wed \square Thru \square Sun \square					
(4.30pr	m to 11:30pm) Fri □	Sat □			
Last Name		First Name		Middle Name	
Address		City		Zip	
		·		·	
Home Phone Ce		one Email Address			
Social Security Numbe	er	_			
Have you ever been convicted of a felony? Yes / No					
If selected for work do you agree for background check ? Yes / No					
References (2 nos) please provide contact numbers:					
Education					
School name	Location	Years Attended	Degree receive	ed	
Any other certificate held:					
Applicant Signature: Date:					