THE Waterfront
A NEW WAVE OF ENTERTAINMENT

# APPLICATION FOR EMPLOYMENT

*Luminary Lounge  Rising Tide  Crush Lounge  Dock & Dine*

## PERSONAL INFORMATION

| NAME (LAST, FIRST, MIDDLE) | | DATE: |
|---|---|---|
| PRESENT ADDRESS (STREET, CITY, STATE, ZIP) | | |
| PERMANENT ADDRESS (STREET, CITY, STATE, ZIP) | | |
| PHONE NUMBER (AREA CODE) CIRCLE ONE: HOME CELL | EMAIL | |
| ARE YOU AT LEAST 18 YEARS OF AGE? | ARE YOU AT LEAST 21 YEARS OF AGE OR OLDER? | |
| NOTE: IF UNDER 18 YOU MAY BE REQUIRED TO PROVIDE AUTHORIZATION TO WORK. ADDITIONALLY, IF YOU ARE UNDER THE AGE OF 21 YOU MAY NOT BE ELIGIBLE TO WORK CERTAIN POSITIONS BASED ON THE JOB REQUIREMENTS. | | |
| IF YOU ARE HIRED, CAN YOU PROVIDE AUTHORIZATION TO WORK IN THE UNITED STATES? | | |
| STATE NAME AND RELATIONSHIP TO ANYONE IN OUR EMPLOY | REFERRED BY | |
| EMERGENCY CONTACT AND ADDRESS | RELATIONSHIP | EMERGENCY CONTACT PHONE NUMBER |

## EMPLOYMENT RELATED INFORMATION

| POSITION DESIRED | | SALARY DESIRED |
|---|---|---|
| DATE YOU CAN START | | DAYS OR HOURS NOT AVAILABLE TO WORK |
| NUMBER OF HOURS DESIRED | PART TIME OR FULL TIME | CAN YOU WORK OVERTIME? |
| ARE YOU NOW EMPLOYED? | | MAY WE CONTACT YOUR EMPLOYER? |
| HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? | | WHEN? |
| FLUENT IN OTHER LANGUAGES | SPECIAL TRAINING, SKILLS, LICENSES, OR CERTIFICATES THAT ARE JOB RELATED | |
| HAVE YOU EVER BEEN ASKED TO LEAVE OR DISCHARGED FROM AN EMPLOYER? | | HAVE YOU USED ANY NAMES OTHER THAN THOSE LISTED ABOVE? |

## EDUCATION

| SCHOOL LEVEL | NAME AND LOCATION OF SCHOOL | MAJOR SUBJECTS | # OF YEARS ATTENDED | DEGREE RECEIVED |
|---|---|---|---|---|
| HIGH SCHOOL | | | | |
| COLLEGE OR UNIVERSITY | | | | |
| COLLEGE OR UNIVERSITY | | | | |
| TRADE SCHOOL | | | | |

## FORMER EMPLOYERS

| DATE (MM/YY) | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|---|---|---|---|---|
| FROM:<br>TO: | | $<br>PER | | |
| FROM:<br>TO: | | $<br>PER | | |
| FROM:<br>TO: | | $<br>PER | | |
| FROM:<br>TO: | | $<br>PER | | |

**REFERENCES** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

| NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## NOTICE PURSUANT TO THE FAIR LABOR STANDARDS ACT (FEDERAL WAGE AND HOUR LAW):

I UNDERSTAND THAT TIPS WILL BE TREATED AS SATISFYING PART OF THE MINIMUM WAGE OBLIGATION UNLESS PROHIBITED BY STATE LAW. TO MAXIMIZE CUSTOMER SERVICE, WE PROMOTE A POLICY OF SHARING TIPS AMONG ALL EMPLOYEES WHO REGULARLY AND CUSTOMARILY PROVIDE SERVICE TO OUR CUSTOMERS, SUCH AS HOSTS, BUSSERS, FOOD RUNNERS AND BARTENDERS. THEREFORE, THE PRACTICE OF SHARING TIPS AMONG TIPPED EMPLOYEES IS APPROVED BY ALL OF OUR FACILITIES UNLESS OTHERWISE PROHIBITED BY STATE LAW. THE PERCENTAGE OF TIPSHARE IS A PERCENTAGE OF YOUR GROSS SALES, AND WILL VARY BY CONCEPT AND LOCATION. YOUR MANAGEMENT TEAM WILL ADVISE YOU WITH THE TIPSHARE PERCENTAGE FOR YOUR LOCATION. MANAGEMENT RESERVES THE RIGHT TO AMEND THE TIPSHARE PERCENTAGE AT ITS DISCRETION AT ANY TIME.

## AUTHORIZATION

I ATTEST WITH MY SIGNATURE BLOW THAT I HAVE GIVEN TO THE WATERFRONT TRUE AND COMPLETE INFORMATION ON THIS APPLICATION AND THAT NO REQUESTED INFORMATION HAS BEEN CONCEALED. I AGREE AND UNDERSTAND THAT ANY MISLEADING OR FALSE INFORMATION PROVIDED BY ME HEREIN, REGARDLESS OF TIME OF DISCOVERY, WILL JUSTIFY MY REJECTION OR TERMINATION FROM EMPLOYMENT WITHIN THE COMPANY.

I FURTHER ATTEST THAT I AM QUALIFIED TO PERFORM ALL OF THE DUTIES OF THE DESIRED POSITION.

I UNDERSTAND THAT THE COMPANY WILL INVESTIGATE THE STATEMENTS CONTAINED IN THIS APPLICATION AND REQUIRES ADDITIONAL BACKGROUND CHECKS (INCLUDING BUT NOT LIMITED TO, CRIMINAL HISTORY, MOTOR VEHICLE DRIVING RECORDS, AND CREDIT HISTORY) WHERE AND AS ALLOWED BY LAW FOR CERTAIN POSITIONS. THEREFORE, I MAY BE REQUIRED TO SUBMIT TO A BACKGROUND CHECK AFTER AN OFFER OF EMPLOYMENT IS MADE. I UNDERSTAND THAT IF THAT IS A REQUIREMENT FOR A PARTICULAR POSITION OFFERED, I WILL NEED TO AUTHORIZED THE COMPANY AND/OR ITS AGENTS, INCLUDING CONSUMER REPORTING BUREAUS, TO INVESTIGATE MY BACKGROUND AND ALL STATEMENTS CONTAINED IN THE APPLICATION, AS MAY BE NECESSARY BASED UPON THE JOB OFFERED. SHOULD I CHOOSE NOT TO AUTHORIZE SUCH BACKGROUND CHECK, THE JOB MAY BE REVOKED. I RELEASE THE WATERFRONT AND/OR ITS AGENTS FROM ANY LIABILITY THAT MIGHT ARISE FROM SUCH REQUEST AND/OR INVESTIGATION.

I UNDERSTAND THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT. I UNDERSTAND THAT IN THE EVENT OF EMPLOYMENT, MY EMPLOYMENT RELATIONSHIP IS TERMINABLE AT WILL AND IS NOT GOVERNED BY AN EMPLOYMENT CONTRACT. I ALSO UNDERSTAND THAT THE USE OF ILLEGAL DRUGS OR ALCOHOL IS PROHIBITED DURING EMPLOYMENT AND IS GROUNDS FOR IMMEDIATE TERMINATION. IN THE EVENT THAT I AM EMPLOYED, I AGREE TO ABIDE BY ALL POLICIES AND STANDARDS OF THE WATERFRONT. I ALSO UNDERSTAND THAT A DRUG TEST MAY BE ADMINISTERED PRIOR TO OR AT ANY TIME DURING MY EMPLOYMENT.

I UNDERSTAND THAT THE WATERFRONT MANDATES ELECTRONIC PAY (VIA DIRECT DEPOSIT OR ELECTRONIC DEBIT CARD) WHERE ALLOWED BY LAW. I AGREE TO RECEIVE MY PAY ELECTRONICALLY IF HIRED BY THE WATERFRONT.

IN CERTAIN STATES AND/OR JURISDICTIONS, AS A CONDITION OF EMPLOYMENT, YOU WILL BE REQUIRED AN ARBITRATION AGREEMENT. IF YOU WOULD LIKE A COPY OF THE ARBITRATION AGREEMENT PRIOR TO COMMENCEMENT OF EMPLOYMENT, PLEASE ASK A MANAGER.

IT IS OUR POLICY TO COMPLY WITH ALL APPLICABLE STATE AND FEDERAL LAWS PROHIBITING DISCRIMINATION IN EMPLOYMENT BASED ON RACE, AGE, COLOR, GENDER, RELIGION, NATIONAL ORIGIN, OR OTHER PROTECTED CLASSIFICATION. ANYONE NEEDING ASSISTANCE WITH ANY FORM MAY REQUEST REASONABLE ASSISTANCE OR ACCOMMODATIONS TO COMPLETE. PLEASE SPEAK WITH A MANAGER REGARDING THE REQUEST.

| SIGNATURE OF APPLICANT | DATE |
|---|---|
| | |

THIS APPLICATION FOR EMPLOYMENT IS GOOD FOR 60 DAYS.

CONSIDERATION FOR EMPLOYMENT AFTER 60 DAYS REQUIRES A NEW APPLICATION BE COMPLETED AND PROVIDED TO THE COMPANY.