



**WHAT IS THE POSITION YOU ARE APPLYING FOR?(PLEASE CIRCLE)**

- |                       |                  |                          |                       |
|-----------------------|------------------|--------------------------|-----------------------|
| <b>HOST/BUSSER</b>    | <b>SERVER</b>    | <b>KITCHEN ASSISTANT</b> |                       |
| <b>BARTENDER</b>      | <b>LINE COOK</b> | <b>PREP COOK</b>         | <b>WAREWASHER</b>     |
| <b>KITCHEN HELPER</b> | <b>BAKER</b>     | <b>SOUS CHEF</b>         | <b>ADMINISTRATION</b> |

**APPLICATION FOR EMPLOYMENT**

The Tropical Trader Company d/b/a Chicken! Chicken! and Cimboco are an equal opportunity employer, dedicated to non-discrimination in employment on any basis, including but not limited to age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, or disability that does not prohibit performance of job functions.

**PERSONAL INFORMATION**

**Today's Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **On Island Until:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Telephone?** \_\_\_\_\_ **Email Address?** \_\_\_\_\_

**Nationality:** \_\_\_\_\_ **Do You Need A Work Permit?** \_\_\_\_\_

**If you have a work permit, who holds it and when does it expire?** \_\_\_\_\_

**If you are seeking to share a permit, what type do you possess?** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Marital Status:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**Do you know anyone who is currently employed with us?** \_\_\_\_\_

**Are you a NWDA candidate?** Yes No

**Are you fully COVID-19 vaccinated?** Yes No (Please provide a copy with resume)

**EDUCATIONAL HISTORY**

<u>SCHOOL</u>	<u>DATES ATTENDED</u>	<u>GRADUATED? YES/NO</u>	<u>QUALIFICATIONS/DEGREE</u>
_____	_____	_____	_____
_____	_____	_____	_____

**WORK EXPERIENCE** (Please include all employment for the last five years starting with the most recent. You may disregard this section if you can attach a recent resume or C.V.)

**1. Employer:** \_\_\_\_\_ (current or most recent) **Phone #:** \_\_\_\_\_

**Dates (From/To):** \_\_\_\_\_ **Manager/Supervisor:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_ **Wage/Salary:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**2. Employer:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Dates (From/To):** \_\_\_\_\_ **Manager/Supervisor:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_ **Wage/Salary:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**OTHER EXPERIENCE**

Please summarize any Restaurant Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please summarize any Guest Service experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Based on your experience, what are your three greatest strengths?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**MISCELLANEOUS QUESTIONS (CIRCLE YES OR NO FOR EACH QUESTION)**

Can you work Days?	Yes No	Can you work Overtime?	Yes No
Can you work Evenings?	Yes No	Can you work Holidays?	Yes No
Can you work Split-Shifts?	Yes No	Do you have any Children?	Yes No
Can you work on Saturday?	Yes No	Are you C.P.R. Certified?	Yes No
Can you work on Sunday?	Yes No		

Have you ever operated a POS system before? Yes No

If Yes, what brand of POS system: \_\_\_\_\_

Do you have dependable transportation? Yes No

If Yes, what is the dependable transportation: \_\_\_\_\_

Do you have a valid Cayman Islands Driver License? Yes No

If Yes, provide the driver license number: \_\_\_\_\_

Have you taken the CI Government Sanitation/Hygiene Class? Yes No

If Yes, when did you pass the course: \_\_\_\_\_

Do you have any physical limitations? Yes No

If Yes, then what physical limitations: \_\_\_\_\_

Have you ever been convicted of a crime? Yes No

If Yes, then what was the conviction for: \_\_\_\_\_

What languages can you speak? \_\_\_\_\_

Any other information you may wish to add relevant to your application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"I certify that all of the information and statements I have made in this application are true, correct, and complete to the best of my knowledge. I understand that, if employed, falsified information or statements in this application are grounds for immediate dismissal."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE EMAIL COMPLETED APPLICATION, RESUME &  
PROOF OF VACCINATION TO:  
CAREERS@TTRGROUP.COM**