Equal Opportunity Employer: It is our policy to abide by all federal laws prohibiting employment discrimination solely on the basis of a person’s race, color, creed, national origin, religion, age, sex, marital status, or physical handicap, except where a reasonable, bona fide occupational qualification exists.

**Personal**

Name: _____________________________________________________________

Social Security No.: _____ - ____ - _____  Phone Numbers: Cell- ( )__________________ Home- ( )__________________

Address: (Current) __________________________________________________

(Street) (City) (State) (Zip)

Desired position: __________________________  Date available for work: __________________________

# of shifts per week? ____________________  $ per week? __________________________

Are there any schedule conflicts? ____________________________________________

Can you after employment submit proof of US citizenship or verification documents of your legal right to work in the US? _____

Have you ever been convicted of a felony, pleaded no contest in a felony, or been convicted of a misdemeanor resulting in imprisonment or a fine over $500 (Conviction will not necessarily disqualify an applicant)? Yes ___ No ___

If yes, explain: ____________________________________________________________

Is there any reason you cannot perform the essential functions of the position for which you are applying? Yes ___ No ___

If yes, explain: ____________________________________________________________

We use nuts and other food allergens in our food preparation. Are you allergic to nuts or any other types of foods? Yes ___ No ___

If yes, explain: ____________________________________________________________

**Education**

<table>
<thead>
<tr>
<th>Type of School</th>
<th>Name and Location of School</th>
<th># of Hours Completed</th>
<th>Did you Graduate?</th>
<th>Major</th>
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**Because We’re Curious**

What city did you grow up in? __________________________

Special skills/Qualifications: __________________________________________

Other languages you can speak: __________________________________________

How many days have you called in sick in the last year? __________________

In a restaurant, when the phone rings, whose responsibility is it to answer the phone? __________________

Whose responsibility is it to clean and re-stock the bathroom? __________________

You wake up feeling sick and you’re scheduled to work lunch. You should:

a. Call your manager and tell him you’re sick and you can’t work.

b. Go back to sleep and hope that you wake up in time for work and you feel better.

c. Try and get your shift covered and call in sick if you can’t find anyone to work.

d. Either get your shift covered OR show up for work because there is no such thing as calling in sick in this industry
How late is it acceptable to arrive for a shift without a phone call to let management know that you will be late?

a. 20 min.
b. 10 min.
c. 5 min.
d. 0 min.

How frequently is it acceptable to call in late?

a. 1 time a year
b. 2 times a year
c. Only in an emergency
d. 3 times a year

What is a "safe" time to arrive for a 10 a.m. shift? __________________

**Employment**

Please indicate previous employment. Start with the present or most recent position including military service.

1. Employer: __________________________ Address: __________________________
   
   Type of Business: __________________________ Business Phone Number: __________________________
   
   Supervisors Name: __________________________ Full Time ___  Part Time ___  Seasonal ___ (check one)
   
   Briefly describe your duties and responsibilities:
   
   Starting Base Salary: ___________ Ending Base Salary: ___________  Job Title: __________________________
   
   Starting Date: ___________ Leaving Date: ___________
   
   Reason for Leaving: __________________________

2. Employer: __________________________ Address: __________________________
   
   Type of Business: __________________________ Business Phone Number: __________________________
   
   Supervisors Name: __________________________ Full Time ___  Part Time ___  Seasonal ___ (check one)
   
   Briefly describe your duties and responsibilities:
   
   Starting Base Salary: ___________ Ending Base Salary: ___________  Job Title: __________________________
   
   Starting Date: ___________ Leaving Date: ___________
   
   Reason for Leaving: __________________________

3. Employer: __________________________ Address: __________________________
   
   Type of Business: __________________________ Business Phone Number: __________________________
   
   Supervisors Name: __________________________ Full Time ___  Part Time ___  Seasonal ___ (check one)
   
   Briefly describe your duties and responsibilities:
   
   Starting Base Salary: ___________ Ending Base Salary: ___________  Job Title: __________________________
   
   Starting Date: ___________ Leaving Date: ___________
   
   Reason for Leaving: __________________________

Who were you referred to us by? __________________________

May we contact your present employer? __________________________

May we contact past employers? __________________________

Signature: __________________________ Date: __________________________