

Application For Employment



CHICKEN - RICE - NOODLES

Personal Information *(please print or type)*

Name _____ Date of Birth _____
last first middle

Present Address _____
street address state zip

Permanent Address _____
street address state zip

Phone # () _____ Social Security Number _____

Have you used any names or social security numbers other than those listed above? _____

In case of an emergency notify _____
name address phone relationship

Have you ever been employed by this company before? _____ Where? _____ When? _____

Have you ever applied to this company before? _____ Where? _____ When? _____

Number of hours desired _____ Full-time or Part-time? _____

Are you willing to work overtime if needed? _____

Please list any hours you are NOT available to work _____

What date are you available to start working? _____

Check the position you are applying for:

Host/Hostess Waiter/Waitress Busperson Dishwasher Other (please specify): _____

Some of our positions require that you be 18 or older. If hired for one of these positions, can you show proof of age? _____

Are you authorized to work in the U.S. on an unrestricted basis? _____

In the last seven years have you been convicted of or on probation for offenses involving the sale of drugs or in any manner reflecting on your honesty, integrity or propensity for violence? _____ If so, explain:

Education

School Level	Name & Location of School	Major	Status	
			No. of Yrs. Attended?	Did you Graduate?
High School				
College				
Trade /Corresp. School				

Additional Information

Are you fluent in other languages? _____ If so, please list _____

Do you have a valid driver's license? _____ State of Issue _____ DL # _____

Type of driver's license _____ Restrictions _____

Please list any other skills, licenses or certificates that are job-related _____

Experience (list below your last two employers, beginning with the most recent employer)

Most Recent Employer		Name of Employer	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Telephone Number		Telephone Number	
Supervisor's Name	May We Contact?	Supervisor's Name	May We Contact?
Dates Employed	Salary / Pay Rate	Dates Employed	Salary / Pay Rate
Start End	Start End	Start End	Start End
Position / Duties	Hours / Week	Position / Duties	Hours / Week
Reasons for Leaving		Reasons for Leaving	

References (include only individuals familiar with your work ability - do not include relatives)

Name	Phone	Name of Business / Address	Years Known / Relationship

OUR COMPANY WILL NOT ENGAGE IN ANY EMPLOYMENT PRACTICES WHICH DISCRIMINATE AGAINST EMPLOYMENT APPLICANTS BECAUSE OF RACE, COLOR, CITIZENSHIP STATUS, NATIONAL ORIGIN, GENDER, AGE, RELIGION, PHYSICAL OR MENTAL DISABILITY, GENETIC INFORMATION, VETERAN STATUS, OR ANY OTHER FACTOR PROTECTED BY LAW.

Authorization

I certify that the answers given herein are true and complete to my knowledge. I authorize the company and/or its agents, including consumer reporting bureaus, to investigate all statements contained in this application, as may be necessary in arriving at an employment decision (including, but not limited to, criminal history and motor vehicle driving records). I release the company and/or its agents from any liability which might arise from such an investigation.

I understand that this application is not a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) will result in termination. I also understand that the use of illegal drugs or alcohol on the job is prohibited during employment. In the event that I am employed, I agree to abide by all policies and procedures of this company.

Signature of Applicant	Date
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This information must be kept on file for one year. This application will remain in our active files for 60 days.