

# Employment Application

Personal Information	
Name _____ M.I. _____ Last _____	
Address _____	City _____
State _____	Zip Code _____
Home Phone _____	Cell Phone _____
E-mail _____	Are you over 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Date of Birth ____/____/____
Are you legally able to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>	
(Legal documents such as Drivers License and Social Security card is required for employment)	

School Most Recently Attended	
Name _____	Last Grade Completed _____
Address _____	Graduated? Yes <input type="checkbox"/> No <input type="checkbox"/> Graduate Year _____
City _____	State _____ Now Enrolled? Yes <input type="checkbox"/> No <input type="checkbox"/>

How many hours would you wish to work each week? \_\_\_\_\_

Could you work extra hours if required? Yes  No

Are you looking for Temporary  Full-Time  Part-Time

Availability							
Shift	MON	TUES	WED	THUR	FRI	SAT	SUN
AM	to	to	to	to	to	to	to
PM	to	to	to	to	to	to	to

Personal References			
Names	Relationship	Phone Number	Occupation

Employment History	
Company _____	Supervisor _____
Address _____	Date worked from _____ to _____
City/State _____	Salary _____ Position _____
Telephone No _____	Reason for leaving _____
Company _____	Supervisor _____
Address _____	Date worked from _____ to _____
City/State _____	Salary _____ Position _____
Telephone No _____	Reason for leaving _____
Company _____	Supervisor _____
Address _____	Date worked from _____ to _____
City/State _____	Salary _____ Position _____
Telephone No _____	Reason for leaving _____

The Secretary of Health and Human Services has determined that certain diseases, including hepatitis A, salmonella, shigella, staphylococcus, streptococcus, giardia, E.Coli, and campylobacter may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves handling and serving food, food service equipment and utensils in a sanitary and healthy fashion. Is there any reason why you cannot perform the essential functions of this job? Yes  No  If yes, explain: \_\_\_\_\_

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During the past 7 years, have you ever been convicted of or pled guilty to a crime, excluding misdemeanors and traffic violations? Yes  No  If yes, explain: \_\_\_\_\_

Have you ever been instituted a lawsuit? Yes  No  If yes, explain: \_\_\_\_\_

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#### GENERAL

What additional relevant experiences or training have you had other than your work experience, military service, and education? \_\_\_\_\_

Activities – civic, athletic, fraternal, etc. (exclude organizations which indicate race, religion, color, or national origin of members): \_\_\_\_\_

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- 1) I certify that I have read and fully completed both pages of this application and that the information contained on this application is correct to the best of my knowledge and understanding that any omission or erroneous information is grounds for dismissal in accordance with CAFE BOBA policy.
  - 2) I authorize the references listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liabilities for any damages that may result from furnishing same to you.
  - 3) I acknowledge that CAFE BOBA reserves the right to amend or modify the policies in its Handbook and other CAFE BOBA policies at any time, without prior notice. These policies do not create any promises or contractual obligations between CAFE BOBA and its employees. At CAFE BOBA, my employment is at will. This means that I am free to terminate my employment at any time, for any reason, with or without cause, and CAFE BOBA retains the same rights.
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CAFE BOBA is an Affirmative Action and Equal Opportunity Employer. Various Federal, State and Local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability, or veteran status. It is CAFE BOBA policy to comply fully with these laws, as applicable, and information requested on this application will not be used for any purpose prohibited by law.

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I understand that as a part of the procedure for my employment application, an investigative consumer report may be made concerning my character, general reputation, personal characteristics and mode of living. Upon written request, additional disclosure concerning the complete nature and scope of the investigation will be provided. If I am denied a job based either wholly or in part because of information contained in an investigative consumer report, I will be provided the name and address of the reporting agency that supplied the information.

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