

## **Application for Employment**

Name (Last)	First				Middle Initial					
Present Street Addr	City:					State:				
Phone:			Email:							
Emergency Contact	:: (Name, phone n	umber, relationshi	p to you)							
What is your favorite	e movie, city, or s	uperpower, and wl	ny?							
Are you a citizen of the U.S. or do										
you have a legal right to work in the Yes U.S?			No	Any offer of employment is conditioned upon completi establishing identity and work authorization.			1			
Position applying for:			Date available for employn		Are you 18 or		Yes No	If under 18, you will be required to submit a birth certificate or work		
						older?		certificate as required by law.		
In the past 5 years, have your been convicted of a				If yes, W	hen?		If yes, Where?			
felony relating to the			Yes No							
Date and details of	conviction:									
Have you previously	, applied at any G	toraci's		If yes, When?			If yes, Where?			
Restauants?	y applied at ally C	eracis	Yes No							
				If yes, wh	no and wha	at is your relation	to them:			
Are you related to a	ny anyone emplo	yed at Geraci's?	Yes No							
				Edu	cation					
Name and leastion	of look cobool			Dates attended:			Craduate d2	Major/Minor:		
Name and location of last school attended:							Graduated? Yes No			
If yes, give name and location:								How far do you live from the		
Are you presently enrolled in Yes No								restaurant?		
shcool?										
List any other educa	ation, accomplish	ments or special ir	iterests:							
				Avail	ability					
	Monday	Tuesday	Wednesday		rsday	Friday	Saturay	Sunday	Total hours per week available:	
To:										
From:										
,				Refer	rences			1		
Name:		Relation to you:		Occupation:			Phone Number:			
		1	1			1				

	Employr	nont Hist	ory (Starting)	with the most red	cent)			
Company Name & Address:	Immediate Supe	ervisor:						
Phone:	Pay ra	ate at time of	f employment:	Dates of employment	From:	То:		
Reason for leaving:	Job Ti	tle:		May we contact	this employer?	Yes	No	
Company Name & Address:					Immediate Supe	ervisor:		
Phone:	Pay R	ate at time c	of employment:	Dates of employment	From:	To:		
Reason for leaving:	Job Ti	tle:		May we contact	this employer?	Yes	No	
Company Name & Address:					Immediate Supe	ervisor:		
Phone:	Pay R	ate at time o	of employment:	Dates of employment	From:	То:		
Reason for leaving:	Job Ti	tle:			May we contact	this employer?	Yes	No
			Declaration	ı				
				nen sign at the botton				
I certify that the answers given herein with the exception of contacting my pr	•				•		·	plication,
I understand that my continued employm				ssigned to me during a	new hire period o	f up to ninety (90) o	lays and u	pon my
continued successful performance. I have	e read, understand and agr	ee to the abo	ve statement.			Initial he	re:	
While this application will be retained on submit a new supplication to be consider								me, I must
						Initial he		
I understand and acknowledge that unles considered "employment at will", which r understood that this "at will" employmer Geraci's Restaurant. I have read, understa	means the Employee many nt relationship will not char	resign at any nged by any w	time and the Empl	oyer many discharge tl	he Employee at an	y time, with or with	out cause	. It is further
						Initial he	re:	
If I should be employed by Geraci's, I und discharge. I have read, understand and a	•		isleading informati	on given on this applic	ation or during an	interview shall resu Initial he		ediate
I authorize an inquiry into my background to supply information concerning my pre		•	•		- '		·	aing agencies
I authorize the references listed above to information they may have, personal or c statement.	- '		•		• •	nt employment an	d any perti	
						Initial he	re:	

Signature:

Date: