

# Mobile Bistro Employment Application

*This company is an Equal opportunity employer and a drug free workplace. We select qualified individuals for employment based upon job related factors, regardless of race, color, religion, gender, age, national origin, disability, veteran status or other legally protected factors.*

Applicant Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Other Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Number and street address \_\_\_\_\_ City \_\_\_\_\_  
State & Zip \_\_\_\_\_

How were you referred to the company? : \_\_\_\_\_

Position(s) applying for: \_\_\_\_\_

Full time work  Y or  N

Temporary work – such as summer or holiday work?  Y or  N

Seasonal on Call work  Y or  N What days/nights and hours are you available for work?

**please be very specific**

\_\_\_\_\_

If applying for temporary work, when will you be available? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_ / \_\_\_ / \_\_\_

Can you work on the weekends?  Y or  N Can you work evenings?  Y or  N

Can you work holidays?  Y or  N Are you available to work overtime?  Y or  N

Wage desired: \$ \_\_\_\_\_

Are you at least as old as.... 16 yrs old?  Y or  N 19 yrs old?  Y or  N

Have you ever applied to / worked for Company before?  Y or  N

If yes, please explain (include date):

\_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for Company?  Y or  N

If yes, state name & relationship:

\_\_\_\_\_

If hired, would you have transportation to/from work?  Y or  N

If hired, would you be able to present a social security number and evidence of your U.S. citizenship or proof of your legal right to live and work in the United States?  Y or  N

This Position you are applying for requires drug free status with regards to all illegal drugs and prescription drugs for which you do not have a current prescription. If hired, are you willing to submit to and pass a controlled substance test now and anytime while employed at this company?  Y or  N

Are you able to perform the essential functions of the job for which you are applying, either with/without reasonable accommodation?  Y or  N

If no, describe the functions that cannot be performed \_\_\_\_\_

*(Note: Company complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)*

Have you ever been convicted of a criminal offense in the last 7 years (felony or misdemeanor)?

Y or  N

If yes, please describe the crime - state nature of the crime(s), when and where convicted and description of the case : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Do you speak, write or understand any foreign languages?  Y or  N

If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be.

\_\_\_\_\_  
Do you have any other experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us?  Y or  N

If yes, please explain: \_\_\_\_\_

**High School:**

School name: \_\_\_\_\_ School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

years completed: \_\_\_\_\_ Did you graduate?  Y or  N Degree / diploma earned: \_\_\_\_\_

**College / University:**

School name: \_\_\_\_\_ School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_ Number of years

completed: \_\_\_\_\_ Did you graduate?  Y or  N Degree / diploma earned: \_\_\_\_\_

**Vocational School/Military:**

Name/Branch: \_\_\_\_\_ Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_ Number of years

completed: \_\_\_\_\_ Did you graduate?  Y or  N  N/A

Degree / Diploma/ Military rank? : \_\_\_\_\_

**Employment History**

Are you currently employed?  Y or  N

If you are currently employed, may we contact your current employer?  Y or  N

Below, please describe past and present employment positions, dating back five years. Please account for all periods of unemployment. Even if you have attached a resume, this section must be completed.

Name of Employer: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Business Type: \_\_\_\_\_

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

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

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

May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Business Type: \_\_\_\_\_

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

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

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

May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Business Type: \_\_\_\_\_

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

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

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

May we contact this employer for references? [ ] Y or [ ] N

**Certification, Authorization, Release and Waiver \*\*\*Please Read and Initial Each Paragraph, then Sign below**

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company. \_\_\_\_\_

I understand that a pre employment drug screen and background check may be required for employment, and my employment is contingent on those results \_\_\_\_\_

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without cause and without liability, and that my employment here does not constitute a contract of employment between myself and this company, I also understand that this employment is classified as seasonal on call employment, and employment for this company is for such period as the company may deem my services to be satisfactory and desirable. I will comply with and be governed by all company policies, rules and procedures as may be in effect from time to time. \_\_\_\_\_

I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation. I have read above, understand its content and meaning and agree to all its provisions.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_