

# **Employment Application**

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant name:	Date:	ate:			
Address:					
	elephone: Other Phone:				
Position(s) applied for or type of work desired:					
Employment desired:full-timepart-time When could ye	ou start work?				
Are there any days or times of the week you are unable to work?	Yes	No			
If Yes, list days/times you are unable to work:					
Are you able to work overtime if necessary?		No			
Are you available to work holidays?	Yes	No			
Do you have reliable transportation to and from work?	Yes	No			
Have you ever been previously employed by our organization?	Yes	No			
Can you submit proof of legal employment authorization and identity	/? Yes	No			
If you are under 18, can you furnish a work permit if it is required?	Yes	No			
Have you been convicted of, pleaded guilty to, or pleaded no contes	t				
to any criminal offense (felony or misdemeanor) in the last 5 yea		No			
(Convictions for marijuana-related offenses that are more than the	wo years old need not be	e listed.)			
If yes, please explain (a conviction will not automatically bar employed	ment):				

How did you find out about Currant American Brasserie?

# **Employment History**

Please provide all employment information about your past four jobs starting with the most recent.

Employer:	Position held:				
Address:		Telephone:			
Immediate supervisor and title:					
Dates employed: from	to	Starting Pay:		Ending Pay:	
Job summary:					
Reason for leaving:					
May we contact this employer for	a reference?	Yes	No		
Employer:		Position	held:		
Address:			Telephone	:	
Immediate supervisor and title:					
Dates employed: from	to	Starting Pay:		Ending Pay:	
Job summary:					
Reason for leaving:					
May we contact this employer for			No		
Employer:		Position	held:		
Address:			Telephone	:	
Immediate supervisor and title:					
Dates employed: from	to	Starting Pay:		Ending Pay:	
Job summary:					
Reason for leaving:					
May we contact this employer for			No		

### Employment History (continued)

Employer:	Position held:				
Address:	Telephone:				
Immediate supervisor and title: _					
Dates employed: from	to	Starting Pay:		Ending Pay:	
Reason for leaving:					
May we contact this employer fo	r a reference?	Yes	<u>No</u>		

### Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

#### **Educational History**

List school name and location, years completed, course of study, and any degrees earned: High school: \_\_\_\_\_

College:

Technical Training:

Other: \_

# References

List 3 references' names, telephone numbers, and years known (do not include relatives or employers):

I hereby authorize Currant to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability Currant and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_