



APPLICATION FOR EMPLOYMENT

We are an Equal Opportunity Employer. All persons shall have the opportunity to be considered for employment without regard to their race, color, religion, national origin, ancestry, alienage or citizenship status, age, disability or handicap, sex or gender, marital status, veteran status, sexual orientation, arrest record, or any other characteristic protected by applicable federal, state or local laws.

We will endeavor to make a reasonable accommodation to the known physical or mental limitations of a qualified applicant with a disability unless the accommodation would impose an undue hardship on the operation of our business. If you believe you require such assistance to complete this form or to participate in an interview, please let us know.

In order for you to be considered for employment by the company, this application must be filled out in its ENTIRETY.

PLEASE PRINT IN INK

Write "N/A" if information is not applicable.

Today's Date	
Name (First, MI, Last)	
Address (Street, Apt. #)	
Address (City, State, Zip)	
Phone Number	
Alternate Phone Number	
Are you over 18 years old?	
If referred by employee, please print employee's name.	
If hired, can you submit documents to prove your legal right to work in the United States?	(circle) Y N

Position applied for	
Date you can start	
Desired salary	

In the table below, please indicate the days you **CAN** work. List the earliest and latest times you **CAN** work.

	MON	TUE	WED	THU	FRI	SAT	SUN
Earliest time in							
Latest time out							

How many hours a week are you available to work?	
Are you able to work holidays and weekends?	

Have you ever applied to any restaurant in The Alicart Restaurant Group? If yes, provide date and location.	
Have you ever been employed by any part of The Alicart Restaurant Group? If yes, provide location, supervisor name, dates of employment and reason for leaving.	

Have you ever been convicted of a criminal offense that has not been expunged, sealed or pardoned?	(circle) Y N
If so, when?	
A criminal offense will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature and circumstances of the offense for which you were convicted and your subsequent rehabilitation.	

I hereby acknowledge the above information is accurate and complete.

Date: _____ Signature of applicant (side 1): _____

	Name and Address of School	Major / Specialty	Degree / Diploma Received
High School			
College			
Other Schooling			

	Current or Most Recent Job	Previous Job	Previous Job
Employer			
Your Position			
Other Positions Held			
Duties			
Address			
Name of Supervisor			
Phone Number for Supervisor			
Dates of Employment	Month / Year to Month / Year	Month / Year to Month / Year	Month / Year to Month / Year
Rate of pay	Starting Wage Ending Wage	Starting Wage Ending Wage	Starting Wage Ending Wage
Reason for Leaving			
May We Contact Your Employer	Y N (circle one)		

Have you ever been terminated or asked to resign from a job(s)? If yes, how many times and what were the circumstances?	
Please list any additional training, skills, experience or qualifications you have that would be applicable to the position you are applying for.	

I have read and fully understand the questions asked in this application. I certify that all of the answers I have given are true, accurate and complete. I understand that the omission and/or misrepresentation of any fact from or on this application or during any interview will result in immediate rejection of my application or if I am hired will be cause for immediate dismissal. Unless I noted otherwise, I authorize the Company to contact all my employment references and personal references, as well as the education institutions I have attended. I further authorize the Company to inquire about, investigate and obtain copies of any records that relate to me from my former employers and educational institutions. I hereby release the Company and all affiliated persons and entities, as well as any person or institution that provides the Company with any lawful information about me, from any and all liability whatsoever resulting from any such lawful inquiry, investigation or communication.

If hired, I agree to abide by all of the rules and regulations of the Company. I understand and agree that nothing in this application shall constitute an offer, a contract or a guarantee of employment for a specific period of time. If hired, I understand **that my employment may be terminated with or without cause and with or without notice at any time, at the will of the Company or me. I further understand that no representative or agent of the Company, other than the CEO, has the authority to enter into any agreement for employment for any specific period of time, or to make an agreement contrary to the foregoing. I also understand that any agreement modifying my at-will employment status must be in writing and signed by the CEO.** In addition, I understand that the Company and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms and conditions of employment.

I understand that any hiring decision is contingent upon my successful completion of all of the Company's lawful pre-employment checks, which may include a background check. I agree to execute any consent forms necessary for the Company to conduct its lawful pre-employment checks.

I hereby acknowledge the notice as described above.

Date: _____ Signature of applicant (side 2): _____

POR FAVOR, SI NECESITA UNA TRADUCCIÓN DE ESTA APLICACIÓN EN ESPAÑOL PÍDASELA A UN GERENTE.