

CHEEVER'S CAFÉ I IRON STARR URBAN BBQ I RED PRIMESTEAK I REPUBLIC GASTROPUB

Please completely fill out this application. Failure to complete all sections may disqualify you from consideration for employment.

Fax completed application to: 405-602-0428

EMPLOYMENT APPLICATION	
•	TODAY'S DATE

Name of Concept and City Location

PLEASE PRINT IN BLUE INK

Position(s) Desired

Hours Available to Work

Last First Middle Initial Have read the Job Description(s) Rate of Pay for the position(s) you are applying Full Time Desired for? If not, stop, read and continue. Part Time 🗆 Yes □ Street Address If hired, can you submit proof of legal right to work in the US? Yes □ No □ Citv State Zip Phone Number Please indicate Home _____ Office _____ Mobile _____ Email Address Phone Number Please indicate Home _____ Office _____ Mobile _____ **PREVIOUS EMPLOYMENT HISTORY** LIST ALL OF YOUR POSITIONS FOR THE PAST 10 YEARS; MOST RECENT EMPLOYER FIRST. USE ADDITIONAL SHEET IF NEEDED. (1) EMPLOYER (most recent) (2) EMPLOYER Address Address City State Zip City State Zip Dates Employed Supervisor Dates Employed Supervisor From: From: Positions Held Telephone Positions Held Telephone Rate of Pay Duties Rate of Pay Duties Reason for Leaving – May We Contact? yes no Reason for Leaving (3) EMPLOYER (4) EMPLOYER City Address City Address Zip State Zip State Dates Employed Supervisor Dates Employed Supervisor From: To: From: To: Telephone Telephone Positions Held Positions Held Duties Rate of Pay Duties Rate of Pay Reason for Leaving Reason for Leaving

PAGE 2:Please completely fill out this application. Failure to complete all sections may disqualify you from consideration for employment.

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DO YOU HAVE ANY RELATIVES EMPLOYED WITH OUR COMPANY? YES NO
IF YES, LIST NAMES AND POSITIONS HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO
If YES, PLEASE LIST THE DATE, PLACE, CHARGE, & DESPOSITION*:
*You need not disclose a conviction a) that was judicially expunged or sealed b) for a marijuana-related offense over 2 years old; c) if you completed pre- or post- trial diversion program; or, d) for a misdemeanor for which probation was successfully completed (or discharged) and the case was judicially dismissed. A conviction will not necessarily be a bar to employment.
EDUCATION
CIRCLE HIGHEST GRADE COMPLETED: 1 2 3 4 5 6 7 8 9 10 11 12 COLLEGE 1 2 3 4 5 6 7
DEGREE(s) / LICENSE(s) HELD
NAME OF LAST SCHOOL ATTENDED
OTHER TRAINING OR TRADE SCHOOL
WHICH COMPUTER PROGRAMS and / or POINT OF SALE SYSTEMS CAN YOU OPERATE?
OTHER KNOWLEDGE, SKILLS, OR ABILITIES
PERSONAL REFERENCES
List the two individuals who will act as personal references. Do not list family members. Name Telephone Relationship
1. <u> </u>
2
REFERRAL SOURCE
REFERRAL SOURCE
How did you hear about the position you are applying for: Internet Newspaper Friend Other
f you were referred by an employee, please print their name here:
ACKNOWLEDGEMENTS DIEASE DEAD CAREELILLY INITIAL EACH BARACRAPH AND SION RELOW
PLEASE READ CAREFULLY, <u>INITIAL EACH PARAGRAPH</u> AND SIGN BELOW. I certify that the statements I have made on this application are true and correct. I understand that any misrepresentations made in this application will be sufficient cause for denial of employment with or discharge from The Company. I understand that nothing contained in this application, or the granting of an interview, is intended to be a contract of employment. I also understand that employment with The Comparis "at-will" and that either of us may terminate the relationship at any time, for any reason, with or without cause. I certify that if employed by The Company, I will abide by all company rules and regulations.
I authorize The Company to investigate my background to determine my suitability for employment and use any information lawfully obtained for any employment-related purpose permitted by law. This investigation may include checking with the schools and employers I have identified, reviewing criminal conviction and driving records, and verifying any other relevant information about me. I release and waive any claims I may have against and indemnify The Company and any of the schools, former employers and other persons or entities for any loss or injury I may sustain as a result of any disclosure made related to this application.
The use, possession, or being under the influence of illegal drugs or alcohol while on Company time is prohibited and will result in disciplinary action, up to and including termination of employment. I hereby agree to any lawful drug or integrity testing or post-offer medical examination that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I authorize any physician, hospital, laboratory or collection site the release to The Company the results of any test or examination or other information which may be necessary to determine my ability to perfor the duties of a job for which I am being considered, prior to employment or in the future during my employment with The Company.
We are an equal opportunity employer. Government Agencies require reports on status of applicants. This data is for analysis and affirmative action only. Submission is voluntary. Failure to supply this information will not jeopardize or adversely affect any consideration you may receiv for employment, or later advancement in employment. 3-White 1-African America 2-Asian/Pacific Islander 3-American Indian 4-Hispanic 5-Decline to State 6-Unknown
Designation Indicating Race: ← Enter number here. Thank you.
Date: Signature:

