

# Stonefire Grill - Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

Referred by \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

How did you find out about this job?  Newspaper  Employee  Walk-in  Relative  Other \_\_\_\_\_

## Applicant Information

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Are you at least 18 years old? \_\_\_\_ If you are under 18 years of age, can you furnish a work permit? \_\_\_\_\_

Are you legally eligible for employment in the U.S.?  (Proof of U.S. citizenship or immigration status is required if hired.)

Have you been convicted of a crime? (California applicants should not include marijuana-related convictions that occurred more than 2 years prior to the application date.)  Yes  No If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

\_\_\_\_\_  
\_\_\_\_\_

Are you a veteran?  If yes, give dates of service: From \_\_\_\_\_ To \_\_\_\_\_

List any special skills or training: \_\_\_\_\_

## Employment Information

Approximately how many hours per week are you available to work? \_\_\_\_\_

List times you are not available to work \_\_\_\_\_

Due to the nature of our business, we ask all employees to available to work weekends and holidays.

Are you willing to work Weekends? \_\_\_\_\_ Holidays \_\_\_\_\_

Are you currently employed?  If hired, when would you be able to start? \_\_\_\_\_

List any friends or relatives employed by this company: \_\_\_\_\_

Have you ever been discharged or asked to resign from any position? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

## Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8 Secondary: 9 10 11 12 G.E.D College: 1 2 3 4 5 6 7 8

Name of School: \_\_\_\_\_ Name of School: \_\_\_\_\_ Name of School: \_\_\_\_\_

## Work History (please begin with most recent)

1. Company \_\_\_\_\_ Phone No. with Area Code (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_

Describe duties briefly: \_\_\_\_\_

Specific reason for leaving: \_\_\_\_\_

2. Company \_\_\_\_\_ Phone No. with Area Code (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_

Describe duties briefly: \_\_\_\_\_

Specific reason for leaving: \_\_\_\_\_

May we contact the employers listed above? \_\_\_\_ If not, list the employers you do not wish us to contact and why:

**We reserve our right to conduct random drug testing if we reasonably suspect any employee of using illegal drugs while working.**

## **Authorizations & At-Will Employment Agreement**

**(please read carefully, then sign and date below)**

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, background check, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

### **AT-WILL EMPLOYMENT AGREEMENT**

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_