



APPLICATION FOR EMPLOYMENT

Restaurant Address
255 E High Street
Moorpark, CA 93021
Phone: (805) 991-4100

Corporate Offices Address
5273 N Commerce Ave. Unit 6
Moorpark, CA 93021
Phone: (805) 523-3232

Position Applied For _____ Today's Date _____

Name _____ E-Mail Address _____

Address _____
Street City State Zip Code

Phone Home (____) _____ Work (____) _____ Cell (____) _____

Are you legally eligible to work in the U.S.? Yes ___ No ___

Note: All prospective employees must submit proof of identity and eligibility for employment in the U.S. prior to appointment.

If employed and under 18, can you furnish a work permit? Yes ___ No ___

EDUCATION: Circle the highest grade you completed. 1 2 3 4 5 6 7 8 9 10 11 12

Name and location of the last high school attended:

Did you graduate? Yes ___ No ___ If not, have you passed a G.E.D. test?
Yes ___ No ___

Circle the number of years of post-high school education completed. 1 2 3 4 5 6 7

Table with 3 columns: School Name and Location, Degree, Major Area of Study

Special Qualifications and Skills: (typing, short hand, foreign languages, professional licenses and certificates, etc.)

Three horizontal lines for special qualifications and skills.

Do you have a driver's license? Yes ___ No ___ Commercial Driver's License Yes ___ No ___

List the types of vehicles you can operate and amount of experience with each. (for driving positions only)

Two horizontal lines for listing vehicle types and experience.

EXPERIENCE: The selection process for most positions involves an evaluation of relevant education and experience. It is important, therefore, that you provide enough details so that your qualifications can be properly evaluated. Start with your present job and work back. Include military service and volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Present Employer _____ Dates: From _____ To _____
 Address _____ Phone# _____ Avg Hrs. per Week _____
 Job Title _____
 Supervisor's Name _____ Reason for Leaving _____
 Describe your work: _____

Employer _____ Dates: From _____ To _____
 Address _____ Phone# _____ Avg Hrs. per Week _____
 Job Title _____
 Supervisor's Name _____ Reason for Leaving _____
 Describe your work: _____

Employer _____ Dates: From _____ To _____
 Address _____ Phone# _____ Avg Hrs. per Week _____
 Job Title _____
 Supervisor's Name _____ Reason for Leaving _____
 Describe your work: _____

On what date would you be available for work? _____

Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

Have you ever served in the military service? Yes ___ No ___
 If yes, Branch _____, Date entered _____, Date discharged _____

CERTIFICATION: (This statement must be signed.)
 I certify that all of the statements made in this application are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not employing me, or for dismissing me after I have begun work. I waive all rights I might have against a previous employer who provides references and/or records concerning my employment history. I understand that for certain positions I may be required to successfully complete a physical examination and/or alcohol and drug test. I understand that my driving record may be checked as well as my fingerprints and police record if I am employed in a sensitive job.

 Signature

 Date