

MAX'S GRILLE EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last Name		First	M.I.	Birth Date:
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
How far do you live from this location?			Do you have reliable transportation to work? YES <input type="checkbox"/> NO <input type="checkbox"/>	
How long have you lived in this area?			How long do you intend to remain on this job?	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for Max's Grille?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
If you are a minor, can and will you provide proof of age? YES <input type="checkbox"/> NO <input type="checkbox"/>			Can you provide a work permit? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you been convicted of any a crime within the past 10 years? YES <input type="checkbox"/> NO <input type="checkbox"/>				
If yes, please explain _____ <small>A conviction record will not necessarily be a bar to employment; other factors, however, such as age at time of the offense, nature of the violation, and rehabilitation will be taken into account.</small>				

THE POSITION

What are you applying for?			Date you can start:			Desired Salary:	
Availability	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From Time							
To Time							

Many Max's Grille and Its Affiliate positions require handling of and accountability for large sums of money.
 Are there any reasons you may not be able to do so? YES NO
 If yes, please explain _____

Are you of legal age to serve alcohol? YES NO Will you submit to drug testing? YES NO

EDUCATION & TRAINING

High School			Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College			Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other			Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

LOCAL EMERGENCY CONTACT

Name	Phone ()
------	-----------

TELL US ABOUT YOURSELF IN YOUR OWN WORDS (FAMILY, GOALS, PETS, ETC.)

PREVIOUS EMPLOYMENT (START WITH MOST RECENT)

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			

From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			

From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			

From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

DISCLAIMER – PLEASE READ CAREFULLY

Max's Grille and Its Affiliates, an equal opportunity employer, selects each employee based solely on job-related qualifications, regardless of race, color, creed, sex, sexual orientation, national origin, age, handicap or other membership in a protected group under State, Federal or local Equal Opportunity Laws.

I understand and agree that:

1. Drug abuse will not be tolerated. Signing & submittal of this employment application constitutes my consent for random drug testing upon request of management. Testing positive for illegal drugs will result in refusal of employment, or if employed, termination of employment.
2. This is an Application for Employment and *not* an Employment Contract and that nothing in this application creates or will create an express or implied contract of employment between Max's Grille and Its Affiliates and me.
3. Max's Grille and Its Affiliates, has the right to search its property, such as lockers or desks, at anytime without prior notice or permission. I will fully cooperate in any investigation of missing Company property by submitting to a search of my person or property. Refusal to cooperate in such investigation may result in my discharge.
4. Any misrepresentation or omission in my Application for Employment or related papers or oral interviews may be justification for refusal of employment, or if employed, termination of employment.
5. Business needs will make the following conditions mandatory: overtime, shift work, a rotation work schedule and a work schedule other than Monday through Friday.
6. Max's Grille and Its Affiliates may investigate my entire work history, law enforcement and traffic records and my verify data given in my Application for Employment, related papers or oral interviews. I authorize such investigation and the giving and receiving of any information sought by Max's Grille and Its Affiliates. I release from all liability any person giving or receiving any such information.
7. If I am employed, I will abide by the rules and regulations of Max's Grille and Its Affiliates, including those which address job-related dress and grooming standards. I understand these rules and regulations may be amended or revised by Max's Grille and Its Affiliates at any time.
8. If I am employed, my employment will be at the sole discretion of Max's Grille and Its Affiliates and shall be for no definite period of time. Max's Grille and Its Affiliates may change any wages, benefits and conditions of employment at any time. Max's Grille and Its Affiliates may terminate my employment at any time without liability except for wages or salary earned as of the date of such termination.
9. If I am employed, I will value the health, safety & well-being of myself, co-workers & customers. I will notify management at the first signs of becoming sick so scheduling contingencies can be made as far ahead as possible. I will familiarize myself with the location of safety equipment such as First-Aid Kits, Fire Extinguishers & Automated External Defibrillators aka A.E.D. Machines.
10. If I am employed, I authorize the use of my likeness, appearance, job performance, voice and name with the operation and promotion of Max's Grille.
11. I will not do anything intentionally to harm the reputation or goodwill of Max's Grille or It's Affiliates.

Signature of Applicant:	Date:
-------------------------	-------

OFFICE USE ONLY

Interview Comments:

Hired by:	Date:	Rate:	Position:
-----------	-------	-------	-----------

Forms completed: W-4 Federal W-4 State Group Ins. I-9 Liquor/Health Permit No. & Expiration Date (IA):