

APPLICATION FOR EMPLOYMENT

Page 1 of 3



An Equal Opportunity Employer

Date _____

Name: _____

Last

First

Middle

Cell Telephone _____ Home Telephone _____

E-mail Address _____

Present Address _____

No.

Street

City/State

Zip Code

Permanent Address if Different from Present

No.

Street

City/State

Zip Code

Employment Desired

Position applying for:

Regular Full Time

Regular Part Time

Salary Desired _____

Temporary

Are you available for work on _____

Yes No?

Are you available to work overtime? Yes No

Personal Information

Have you ever applied to, or worked for Hook Burger before? Yes No

If yes when? _____

Are you at least 18 years old? Yes No

(If under 18, hire is subject to verification that you are of minimum legal age.)

If hired, can you provide evidence of your U.S. citizenship or proof of eligibility to work in the USA? Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodations?

If no, describe the functions you cannot perform _____

(Note: We comply with ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, drug screen, and skill and agility tests.)

If hired, will you have a reliable means of transportation, to and from work? Yes No

Education, Training, and Experience

School	Name and address	No. Years Completed	Did you Graduate	Degree/Diploma
High School				
College/University				
Vocational/				
Business				

APPLICATION FOR EMPLOYMENT

Page 2 of 3

Do you speak, write, or understand any foreign languages? Yes No

If yes, which language(s)? _____

Do you have training, experience, qualifications, or skills that you feel make you especially suited for work at Hook Burger?

Yes No If so, please explain _____

What interested you in Hook Burger? _____

What are your hobbies, special interests, and activities? (Please omit those indicating race, color, religion, sex, national origin, ancestry, age, or existence of a disability.) _____

Employment/Work Experience

Please list below all present and past employment for the last 10 years, starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of employer	Address	Telephone
------------------	---------	-----------

Employed (Month & Year) From To	Average number of hours worked per week
------------------------------------	--

Positions held:	Supervisor's name & position	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	------------------------------	---

Describe all your significant duties: _____

Reason for leaving: _____

Name of employer	Address	Telephone
------------------	---------	-----------

Employed (Month & Year) From To	Average number of hours worked per week
------------------------------------	--

Positions held:	Supervisor's name & position	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	------------------------------	---

Describe all your significant duties: _____

Reason for leaving: _____

Name of employer	Address	Telephone
------------------	---------	-----------

Employed (Month & Year) From To	Average number of hours worked per week
------------------------------------	--

Positions held:	Supervisor's name & position	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	------------------------------	---

Describe all your significant duties: _____

Reason for leaving: _____

APPLICATION FOR EMPLOYMENT

Page 3 of 3

To aid us in checking records and to verify prior employment and education, please indicate whether you were ever employed or enrolled in a school under a name other than that used on the application. Yes No

If yes, please specify the name you were employed or enrolled under. _____

Please provide the names, addresses, and telephone numbers of at least three references who are not related to you:

I authorize all corporations, companies, credit agencies, state motor vehicle departments, financial institutions, educational institutions, medical facilities, persons, references, law enforcement agencies, present and former employers and military services to release all written and verbal information about me to Hook Burger Bistro, its affiliates and its background verification contractor, SafeCare Information Services. I release these entities and Hook Burger Bistro from any liability and responsibility for releasing, collecting and reporting information about me. I authorize the procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable. I understand that I have the right to make a written request within a reasonable period of time to SafeCare Information Services for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation. I further understand that SafeCare Information Services reporting of information pursuant to the Fair Credit Reporting Act is not intended to authorize or condone a prospective employer's, franchisor's, landlord's or appointer's request for and reliance upon information for purposes which are not legitimate under the Fair Credit Reporting Act for any Federal or State laws. I further authorize SafeCare Information Services to disclose information collected about me to a prospective employer, franchisor, landlord or companies for the purpose of evaluating me for employment, insurance appointments, franchising or tenancy. This authorization, in original or copy form shall be valid for this and any future report that may be requested. I understand that the purpose of this application is for information only, and is no way binding upon either Hook Burger Bistro, its affiliates, or myself, nor does it imply that there is any legal or commercial relationship between either party. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive any offer or, if I am hired, my immediate dismissal from employment.

In consideration of my employment, I agree to conform to the rules and standards of the Company, as set forth in the Company's Employee Manual or otherwise posted, as may be amended from time to time by the Company without any prior notice to or the consent of the undersigned applicant. I further agree that my employment and compensation can be terminated at will, with or without cause, and that no employee or representative of the Company, other than its President, has the authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing. Further, the President of the Company may not alter the at-will nature of the employment relationship unless the President and I both sign a written agreement that clearly and expressly specifies the intent to do so. I agree that this constitutes an integrated agreement with respect to the at-will nature of my employment relationship, that it is final and fully binding, and that there are no oral or collateral agreements regarding this issue.

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States, as well as the satisfactory completion of a pre-employment drug screening and post-offer medical examination.

Signature of Applicant

Date