



EMPLOYMENT APPLICATION

Fill out completely. Tell the complete truth!!!
Do not apply if under 18

Date: _____

Restaurant Location Applying for: _____

BASIC INFORMATION

Name _____ Nickname _____

Social Security Number _____ Drivers License #/State. _____

Do you have the legal right to work in the U.S.? Yes No Are you under 21 years of age? Yes No

If Yes, are you under 18? Yes No If Yes, what is your Date of Birth? _____

Current Address _____ City/State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Other Phone _____

If you have lived at the above address for less than 5 yrs, please list your previous address:

Street Address _____ City/State _____ Zip Code _____

WORK AVAILABILITY & RELATED INFORMATION

- If hired, how long do you plan to work for us? _____
- We are open 24 hr per day, 7 days per week. What hours are you available to work? [The greater availability, the more likely that we will hire you. We do not hire people with very limited availability.]
Mon: Anytime _____ AM to _____ PM **Fri:** Anytime _____ AM to _____ PM
Tue: Anytime _____ AM to _____ PM **Sat:** Anytime _____ AM to _____ PM
Wed: Anytime _____ AM to _____ PM **Sun:** Anytime _____ AM to _____ PM
Thur: Anytime _____ AM to _____ PM
- Are you interested in working full-time part-time temporary Expected Starting Pay Rate: _____
- Would you like to work overtime? Yes No If Yes, total # of hrs per week you'd like to work? _____
- What position/job duties do you see yourself performing if hired? (list all) _____

- Are you willing to work such that you get dirty everyday? Yes No Unsure
- Are you working anywhere currently? Yes No If Yes, where? _____
- Do you plan to quit your current job? Yes No If No, what hrs would you be working there? _____
- Is there anything that might prevent you from coming to work when scheduled, such as lack of transportation?

WORK EXPERIENCE (START WITH MOST RECENT POSITIONS & ENTER IN CHRONOLOGICAL ORDER)

- **COMPANY** _____ Mo./Yr. Hired _____ Mo./Yr. Left _____
 Starting Wage Rate: \$ _____ Ending Wage Rate: \$ _____ Supervisor _____ Phone _____
 Primary Job Duties _____
 Average # of hours worked per week _____ Time of day worked: Day Shift Night Shift
 Reason for Leaving _____
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PHYSICAL ABILITIES & HEALTH

- Do you regularly take medications of any type which might prevent you from being a very hard working, effective employee? Yes No If so, please describe the conditions and list the medications. _____

- Can you lift : 25 pounds Seldom Frequently 50 pounds Seldom Frequently
- Can you stand/walk 12 hours per day without sitting? Yes No If no, why not? _____

EDUCATION

Are you currently enrolled in school? Yes No If Yes, name of school _____

What was the last year of school completed?

Elementary 1 2 3 4 5 6 Junior High 7 8 9 High School 10 11 12 College 1 2 3 4 Grad. Schl 1 2 3

What is the name of the school that you last attended? _____

If you did not complete high school, have you completed your GED? _____

Approximately how many days of school per year did you miss? _____

What was the highest math course you took in school? _____

Do you understand fractions, percentage and numbers with decimal points? Yes No I'm not sure

Are you currently in school now? Yes No

If not, are you planning to return to school? Yes No If yes, when do you plan to return to school? _____

JAIL & DISCIPLINE

• Have you ever been convicted of a crime other than a minor traffic offence ? Yes No Explain? _____

• Have you ever been terminated from any job for any reason? Yes No Explain? _____

PERSONAL HABITS SECTION

Only answer yes to the questions below if you currently engage in these activities.

- Do you smoke cigarettes? (check one)
 never ¼ pack or less per day ½ pack per day 1 pack per day 1½ packs per day
 2 or more packs per day
- Do you drink alcohol? (check one) never 1 or 2 times per week three to five times per week every day
- If you drink alcohol, how much do you drink when you drink ? (check one)
 1 or 2 drinks 3 or 4 drinks 5 drinks or more. [Note 1 beer equals 1 drink , 1 glass of wine equals 1 drink]

OTHER INFORMATION

Have you ever worked for us before? _____ If so, when? _____ Under what name? _____

Do you have friends/ relatives who work for us or have worked for us? _____ If so, please provide names and approximate dates of employment _____

For how long do you plan to work here if you get the job? _____

EMERGENCY CONTACT NUMBERS

Name _____ Phone Number _____ Relationship _____

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I certify that the information I have provided Chacho's in the application process is complete and accurate to the best of my knowledge. I understand that any untruthful or misleading statements made by me on this application or during the employment process will subject me to immediate termination regardless of how long I have worked at Chacho's. I also understand that if I fail to complete or fail to sign my application, it is likely that Chacho's will not consider my application since an incomplete and/or unsigned application may be understood by Chacho's as an attempt to mislead. I understand that in making their decision on whether to employ me, Chacho's has a need and interest in investigating my background, my employment history, and verifying my references. Therefore, I authorize all individuals, companies, schools, and agencies concerned to provide to Chacho's and their agents all information necessary to verify the statements that I have made on this application and during the application process, and I fully release those entities from any liability for doing so. I understand that Chacho's will not consider employing me until they have received satisfactory reports from my prior employers, supervisors, co-workers, and/or subordinates. I further understand that any offer of employment made by Chacho's may be contingent upon my passing a prescribed physical exam to ensure that I am physically capable of performing the essential functions of the job, passing other examinations, and passing a drug test. I also understand that any offer of employment by Chacho's may be contingent upon my providing sufficient proof of my identity and documenting my right to work. I understand and agree that my employment at Chacho's is "at will," and that "at will" employment means that I have the right to terminate my employment at any time, with or without cause, and likewise, Chacho's has the right to terminate my employment at any time, with or without cause. I agree to abide by and obey all policies, rules, and regulations of Chacho's. I understand that as an employee or former employee of Chacho's I am prohibited from releasing to any other person or entity any information whatsoever about Chacho's, or that I obtained from Chacho's, which could in any way be considered confidential or a "trade secret." I understand that any information that has not been disclosed to the public by Chacho's should be treated as confidential and proprietary. I further understand that as an employee or a former employee of Chacho's I am prohibited from using, in any matter whatsoever, information that I have obtained from Chacho's that is confidential, proprietary, privileged, or a "trade secret," whether for my own personal benefit or gain or for any other reason whatsoever. I understand and agree, and Chacho's understands and agrees, that all disputes between us, and all disputes between me and any agent and/or employee of Chacho's, relating to my employment with Chacho's, shall be resolved solely through binding arbitration under the Federal Arbitration Act, using the rules and procedures promulgated by the American Arbitration Association. I understand and agree that the arbitration will be conducted under the Federal Arbitration Act since Chacho's is engaged in interstate commerce. I understand that by agreeing to arbitration as the sole means of dispute resolution, I am waiving any right that I might have to a jury trial. I also understand and agree that Chacho's will pay the fee necessary to initiate the arbitration proceeding and the fees and expenses charged by the arbitrator in the arbitration proceedings. However, I also understand and agree that, at the conclusion of the arbitration, the arbitrator may, if he/she deems it equitable, require me to reimburse Chacho's a portion of the arbitration fees and expenses paid by Chacho's, in an amount determined by the arbitrator to be fair, just, and conscionable.

Signature _____ Print Name _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER