

## APPLICATION FOR EMPLOYMENT

To be considered for employment, this application must be **filled out ENTIRELY.**All information provided by applicants will be verified for accuracy.

Name (Print in Ink):							Date of	f Birth:	Today's Dat	te:
Current Address (Street, City, State, Zip):										
Cell Phone:	Home Ph			Phone:			Email:			
			D 11 ( ) A 1 1				c	D'I	· ·	4 41 * 1.0
<b>Social Security Number:</b>			Position(s) Applying							
				☐ Server ☐ Host ☐ Yes				☐ Yes	□ NO    II	yes, who?
<b>Are you over the age of 18?</b> □ Yes □ No			)	Do you have the legal right to w					work in the	United
Type of Employment:				States?						
				☐ Yes ☐ No						
☐ Part-time ☐ Full-time				It is Pho-Topia policy to hire only United States Citizens or i						
☐ Seasonal ☐ Temporary				authorized to work in the United States. All employees must verify employment eligibility prior to beginning work.						
Date you are available to start:			How many hours per we			eek Expected Hourly Rate:				
			can you work?							
Work Schedule Availability										
Please check each shift that ye 9:00 P.M. every night.	ou are availa	able to	work	. Shif	ts start a	s early	as 10:30	A.M. every da	y and the resta	urant closes at
Shifts	Monday	Tues	esday We		lnesday	sday Thursday		Friday	Saturday	Sunday
<b>Lunch</b> (10:30–4pm)										
<b>Dinner</b> (4pm-9pm)										
Have you ever been convicted of a felony <u>or</u> been incarcerated in connection with a felony in the past 10 years? You do not have to disclose any convictions that have been annulled, expunged, erased, pardoned, or sealed by court. A conviction will not necessarily exclude you from employment. $\square$ Yes $\square$ No										
If you answered "yes," pleas	se explain:									
Work History — List your la	ast three jobs	s from	most	to lea	ast recent	. Pleas	e fill out	all information	completely.	
	<b>Current or Most Recent J</b>			ob	b Previous Job			Previous Job		
Company Name										
Company Address										
Company Number										
Name and Title of Supervisor										
Job Title/Position										
<b>Dates of Employment</b>	// MM/YY - MM/YY			_	// MM/YY - MM/YY			/_ MM/YY	/ - MM/YY	
Reason for Leaving	IVIIVI/ I	. 1 -	101101/	1 1		IVIIVI	-	IVIIVI/ I I	IVIIVI/ I I	- 1/11/1/11
Rate of Pay	\$\$_Starting Wage Ending Wag				\$\$Starting Wage Ending Wage			\$ \$ Starting Wage Ending Wage		
May we contact this employer?	□ Yes □ No				□ Yes □ No			□ Yes □ No		

Summarize your special ski	ills for this job:			
Do you have a stable form of t	ransportation?	То		
Have you ever worked in a res If yes, what kind of restaurant?	taurant before?	No		
Have you ever been employed If yes, state dates of application,				
	ACKNOWLI	EDGEMENT		
		will not be used for limiting or ed by local, state, or federal law.		
misrepresentation, false stateme	nts, or omission of facts on this	verify the information that I have	iate dismissal. I authorize Phô-	
employment can be terminated You understand that your employee	at any time for any reason, with byment is "at will," and that you	or without cause, with or without acknowledge that no oral or writer your at-will employment state	ut notice, by you or Pho-Topia. itten statements/representations	
Signature of Applicant:		]	Date:	
Office Use:				
Starting Date:	1 1	Starting Pay Rate	\$	

Starting Date:	1 1	Starting Pay Rate:	\$		
Training Date:	Training Time:	Training Date:	Training Time:		
1 1	: :	1 1	: :		
1 1	: :	/ /	: :		
1 1	: :	/ /	: :		
/ /	: :	Total Training Hours:			