



Employment Application

General Information:

Name:
First Middle Last

Address:
Street Address City State Zip Code

Social Security #: Phone #:

Email: Cell Phone #:

Have you ever worked for **HANGRY JOES** before? If YES, when/where?

Are you legally able to be employed in this country (If hired, verification will be required by law)?

Do you have any relatives that work for **HANGRY JOES LLC**? Are you presently employed? If YES, where / what position?

Have you ever been terminated or discharged from a position? If YES, why?

What type of position are you seeking? Full or Part Time Number of Hours Per Week?

Hours Available:	MON	TUE	WED	THUR	FRI	SAT	SUN
FROM							
TO							

Education:

School Name	City / State	Years Attended	Diploma/Degree

Employment History:

Company: Address:

Position: Supervisor: Phone #:

Employed From: To: Ending Wage: May we contact?

Reason For Leaving:

Company: Address:

Position: Supervisor: Phone #:

Employed From: To: Ending Wage: May we contact?

Reason For Leaving:

In compliance with Federal and State Equal Employment Opportunity Laws, qualified applicants are considered for all positions applied for without regard to race, religion, sex, national origin, age, veteran's status, marital status, disability, or handicap, or any other legally protected status.

I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interviews may result in discharge and that my first three months of employment will be probationary. In consideration of my employment, I agree to conform to the rules and regulations of **HANGRY JOES LLC** and hereby state my understanding that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I also understand that neither a safety manual nor an employee handbook nor any other WFA publication changes this at-will relationship.

I understand that unless otherwise prohibited by applicable law, I may be required at any time to submit to a physical, urinalysis, or other examination as condition of my employment with the Company. By accepting employment, I agree to submit to such examinations or test as required by the Company, all at Company expense.

I authorize you to make such investigations and inquiries of my personal, employment or other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

Signature: _____ Date: _____