



First Name	Middle	Last	Date
Street Address			Cell Phone
City	State	Zip Code	Position Desired
Email	How did you hear of opening?	Date Available	Wage Desired
Available to work weekends and holidays?	Can you perform the essential functions of this job, with or without reasonable accommodations?		Food Handler Certified
Hours seeking / Days not available	If no, describe the essential functions that cannot be performed		
If under the age of 18 years old, can you provide a work permit?	<i>Note: We comply with the ADA and applicable State Law and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.</i>		
Education	School Name and Location	Diploma / Degree	Major
High School			
College or University			
Technical, Trade or other			

On a scale of 1-5 (5 being the highest) how would your previous employers rank you in the following areas?

- | | | |
|----------------|-----------------|-------------------------------------|
| ___ Initiative | ___ Team Work | ___ Enthusiasm / Energy |
| ___ Commitment | ___ Flexibility | ___ Attention to Detail |
| ___ Work Ethic | ___ Punctuality | ___ Response to Criticism |
| ___ Job Skill | ___ Attendance | ___ Capability of Taking Directions |

References

Please list three references that have worked with you and are well acquainted with your qualifications

Name	Occupation	Phone	Location Employed

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (attach resume if available)

Name of your present employer or most recent		Type of Business
Address		Business Phone
Supervisor's Name	Title	Best time to contact
Starting Date	Starting Position	Duties
Ending Date	Ending Position	Duties
What did you like most about the job?		
What did you like least?		
Why are you considering leaving or why did you leave?		
<hr/>		
Name of your previous employer		Type of Business
Address		Business Phone
Supervisor's Name	Title	Best time to contact
Starting Date	Starting Position	Duties
Ending Date	Ending Position	Duties
What did you like most about the job?		
What did you like least?		
Why are you considering leaving or why did you leave?		
<hr/>		
Name of your previous employer		Type of Business
Address		Business Phone
Supervisor's Name	Title	Best time to contact
Starting Date	Starting Position	Duties
Ending Date	Ending Position	Duties
What did you like most about the job?		
What did you like least?		
Why are you considering leaving or why did you leave?		

List any additional information you would like us to consider

Applicant Statement

I certify that all information provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from Toyon Grill and Event Center service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the end of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

It is my understanding that Toyon Grill and Event Center is a at-will employer and by understanding this it has been explained to me that if I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____

Date _____