

HABANERO'S FRESH MEX CANTINA

Application for Hourly Employment

Habanero's Fresh Mex. Inc. is an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, gender age, marital status, sexual orientation, gender identity, disability, veteran status or any other prohibited basis. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job related factors.

PERSONAL INFORMATION

Form with fields for Last Name, First Name, Nickname, Middle Name, Home Address, Apt#, City, State, Zip Code, Birthday / Not The Year, Home Phone, Cell Phone, Social Security Number.

EMPLOYMENT DESIRED Circle your answer

Position desired? Cashier Kitchen Prep Line Cook Cook Any Date you can start?
Are you able to work? OVERTIME FULL-TIME PART-TIME ANYTIME

AVAILABILITY Please give the HOURS you are available. Example: Mon 3pm-8pm, Tue 6pm-Close

Table with columns for Sun, Mon, Tues, Wed, Thurs, Fri, Sat and rows for AM and PM.

GENERAL INFORMATION Circle Yes or No

Have you ever worked or attended School under any other names? Yes No
If yes, please give names:
How did you hear about Habanero's job opportunities? Drive By Walk-in Called Others:
Have you ever worked at a restaurant environment? Yes No
If yes, which restaurant & location?
Do you have a Food Safety Certification? Yes No
If no, are you willing to obtain a Food Safety Certification? Yes No
List any relatives who are presently, or have formerly been, employed by Habanero's:
If hired, can you furnish proof that you are eligible to work in the US? Yes No
Have you been convicted of any law violation (except a minor traffic violation)? Yes No
If yes, when?
A "Yes" answer does not automatically disqualify you from employment since the nature of the offense, date and the job for which you are applying will be considered.

Job History Please list your last two employers below, starting with the most recent.

Name of Employer			Position Held		
Street Address			Dates Employed	From	To
City	State	Zip	Pay	Starting	Ending
Supervisor	Telephone #		Reason For Leaving		

Name of Employer			Position Held		
Street Address			Dates Employed	From	To
City	State	Zip	Pay	Starting	Ending
Supervisor	Telephone #		Reason For Leaving		

Education

High School	City	State
Undergraduate College	City	State
Dates Attended:	From: _____	To: _____ Degree Earned: _____

References Please give two references.

Name	Telephone Number	How Acquainted?
_____	_____	_____
_____	_____	_____

Please read each statement carefully before signing

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employer and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand that I may be required to successfully pass a background check and I hereby consent, if required, to a pre and/ or post-employment background check. **I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. I ALSO UNDERSTAND THAT NO ORRRER OR PROMISE OF EMPLOYMENT HAS BEEN MADE TO ME. I ENDERSTAND THAT IF I AM HIRED, I WILL HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.**

I have read, understand, and by my signature consent to these statements.

Name (Print): _____

Signature: _____ Date: _____