



APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE- PLEASE PRINT)

Name: _____ Date of Application: _____

Address: _____
Street
City
State
Zip Code

Phone Number: _____ Cellular Phone Number: _____

Position(s) applying for: _____ Date Available to start: _____

Have you ever worked for Inka Mamas before? No Yes If Yes, when? _____ Where? _____

Are you over 19 years of age? Yes No Are you over 21 years of age? Yes No

What is your date of birth? (dd/mm/yyyy) _____ (optional)

Are you a citizen of the United States? Yes No If not, do you have work papers? Yes No

Have you ever been convicted of a felony? Yes No

If yes, please give dates and details: _____

Are you a smoker? Yes No

Have you ever worked for Inka Mamas? If yes, When? _____ Where? _____

List the names and relationship of friends and relatives working for Inka Mamas: _____

List Hours Available For Work (List school year availability and attach school schedule):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

How many shifts are you looking to work: 1-2 2-3 3-4 4-5 Other: _____

List any circumstances, including other employment or extracurricular activities, which will limit your hours of availability with Inka Mamas: _____

Available During School Vacations: Full Part None

How were you referred to Inka Mamas? _____ What is your highest level of education? _____

Are you presently in School? Yes No If Yes, where? _____ What is you area of study (major)? _____

How far do live from this store? _____ How will you get to and from work? _____

In case of emergency, notify: _____
Name
Relationship
Phone number

What do you feel the most important qualities of the position you are applying for are? _____

Personal or career goals? _____

What special qualifications do you have that would help you in the restaurant industry? _____

Special hobbies, skills, or knowledge? _____

List prior employment starting with the most recent:

1) Company: _____ Location: _____ Phone number () _____
 Position held: _____ Responsibilities: _____
 Reference: _____ Position: _____ Dates worked: From _____ To: _____
 Starting Wage: \$ _____ Ending Wage: \$ _____ Reason for Leaving _____
 May we contact this employer for reference? Yes No

2) Company: _____ Location: _____ Phone number () _____
 Position held: _____ Responsibilities: _____
 Reference: _____ Position: _____ Dates worked: From _____ To: _____
 Starting Wage: \$ _____ Ending Wage: \$ _____ Reason for Leaving _____
 May we contact this employer for reference? Yes No

3) Company: _____ Location: _____ Phone number () _____
 Position held: _____ Responsibilities: _____
 Reference: _____ Position: _____ Dates worked: From _____ To: _____
 Starting Wage: \$ _____ Ending Wage: \$ _____ Reason for Leaving _____
 May we contact this employer for reference? Yes No

4) Company: _____ Location: _____ Phone number () _____
 Position held: _____ Responsibilities: _____
 Reference: _____ Position: _____ Dates worked: From _____ To: _____
 Starting Wage: \$ _____ Ending Wage: \$ _____ Reason for Leaving _____
 May we contact this employer for reference? Yes No

I authorize investigation of all statements contained in this application form if I am considered for employment, and hereby authorize previous employers, personal references named, or any other person or persons to whom the company may refer to give any and all information regarding my employment or scholastic standing together with any other information, personal or otherwise, that may not be on their records.

I understand that misrepresentation or omission of the facts called for hereon or receipt of unsatisfactory references will be sufficient cause for dismissal from the company's service if I shall have been employed.

I understand the need and importance of scheduling reliable staff during those work days and hours required to conduct your business. I acknowledge company rules and policies require that I inform my scheduling manager any changes in my work availability. Accordingly, I understand and agree it is my responsibility to immediately inform my scheduling manager of any changes.

I further understand that if I shall be employed, my employment will be on a probationary basis and either of us may terminate our work relationship for any reason. I may be discharged at any time for my inability to adapt myself to their requirements and duties of my employment.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

Social Security No.	Hire Date	Pay Rate	Position	Location(s)	Birthdate	Hired By