

**APPLICATION FOR EMPLOYMENT**

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status or the presence of a non-job-related medical condition or handicap.

**GOOD-N-CRISP CHICKEN**

**PERSONAL**

(PLEASE PRINT PLAINLY)

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
Social Security No. \_\_\_\_\_  
Present Address \_\_\_\_\_  
How many years have you lived at this address? \_\_\_\_\_ Telephone NO. (\_\_\_\_) \_\_\_\_\_  
Previous Address \_\_\_\_\_ How long you lived there \_\_\_\_\_  
Rate of Pay Expected \$ \_\_\_\_\_ Per \_\_\_\_\_  
How did you learn of this opening? \_\_\_\_\_  
Do you want to work Full Time Part Time? Specify days and hours if part time \_\_\_\_\_  
Indicate your availability for work by checking the appropriate space:

Weekdays: \_\_\_\_\_ Before noon: \_\_\_\_\_ After noon: \_\_\_\_\_ Evenings \_\_\_\_\_  
Weekends: \_\_\_\_\_ Before noon: \_\_\_\_\_ After noon: \_\_\_\_\_ Evenings \_\_\_\_\_  
Holidays: \_\_\_\_\_ Before noon: \_\_\_\_\_ After noon: \_\_\_\_\_ Evenings \_\_\_\_\_  
When will you be available to start work? \_\_\_\_\_

Are you over 16 years of age and under 70? Yes \_\_\_\_\_ No \_\_\_\_\_  
If not, please state your age: \_\_\_\_\_. Can you furnish proof of age? YES \_\_\_\_\_ NO \_\_\_\_\_  
Are you a U.S. citizen? Yes \_\_\_\_\_ NO \_\_\_\_\_

Do you have or suspect any health problems, which could prevent you from obtaining a food handlers, permit or otherwise prevent you from physically performing this job? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, explain in full: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor, other than minor traffic violations? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please describe when, where, disposition, and nature of any such conviction or convictions.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION AND TRAINING**

	Name of School	Location	Course of Study	Grade Completed	Graduated	Degree Earned
High School						
College						
Other						

**PRIOR WORK HISTORY**

List in Order, Last or Present Employer First

Dates		Name and Address of Employer	Rate of Pay		Supervisors Name Telephone Number	Reason for Leaving
From	To		Start	Finish		

Describe the type of work you performed

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From	To		Start	Finish		

Describe the type of work you performed

May we contact your current employer? YES \_\_\_\_\_ NO \_\_\_\_\_  
 Please state any name by which you have been know other than the name under which you are applying: \_\_\_\_\_

**PERSONAL REFERENCES**

List TWO personal references (not relatives or previous employers). Please provide address and telephone numbers:

\_\_\_\_\_

**AGREEMENT**

I certify that the facts in this application are true and correct to the best of my knowledge to the best of my knowledge. I understand that any misrepresentation or omission of any material facts in the application may be cause for rejection of this application or termination of my employment. I voluntarily authorize the restaurant to which I am applying to conduct a thorough investigation of my background and to receive information and documents of my educational, professional, conviction, and employment records, if any, to determine my acceptability for hiring or continued employment. I hereby release from any and all liability the restaurant and its affiliates, partners of each of the foregoing, from any and all claims and causes of action, in law or equity, including all damages, which I might have or incur as a result of any investigation conducted pursuant to this authorization. I understand and agree that that any offer of employment is contingent upon passing any examination or testing as required by the restaurant and based upon current governing regulations. Routine inquiries may be made through a consumer reporting agency which could provide information concerning my residence, character, reputation, personal characteristics, mode of living, education, employment, credit record, general health, and habits. Only job related information developed from such a report will be considered in evaluating this employment application or continued employment.

I certify that I have read and understand each of the statements and authorizations contained in and throughout this employment application.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

\_\_\_\_\_  
 APPLICANTS SIGNATURE

\_\_\_\_\_  
 DATE