



Employment Application

We appreciate your taking the time to fill out this application. It is important that all questions be answered completely and accurately. Resumes will be accepted as additional information but not in place of a completed application. Please be sure to sign the application when it is completed.

Blazin' Mongolian BBQ IS AN EQUAL OPPORTUNITY EMPLOYER. It is our policy to abide by all Federal, State and local laws which prohibit discrimination against qualified applicants on account of race, color, creed, national origin, religion, age, sex, marital status, disability, sexual orientation, or any other protected classification prohibited by Federal, State, or local law, if otherwise qualified.

NOTE: If you need assistance in completing this application because of a disability, we will be happy to assist you.

Name: _____

Last

First

Middle

Social Security No

Current Address: _____

Street

City

State

Zip Code

Type of Position Desired: _____ Date Available For Work _____

Can you *after employment* submit proof of U.S citizenship or verification documents of your legal right to work in the United States?

Yes

No

Are you 16 years or older? Yes No If No, list age:

Are you willing to work flexible hours, which could include nights, weekends, and/or overtime? Yes No

Indicate the shifts you are available to work by marking an "x" in the boxes below.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Lunch							
Dinner							

Were you previously employed by Blazin' Mongolian BBQ? Yes No

If Yes, Dates? _____ Location? _____ Position? _____

Do you have any relatives employed by Blazin' Mongolian BBQ? Yes No If Yes, list names, relationships, and place employed: _____

Do you plan to engage in other work while working at Blazin' Mongolian BBQ? Yes No

Have you ever been convicted of a felony, pled guilty or no contest to a felony, been placed on probation for a felony offense or received deferred adjudication (Conviction will not necessarily disqualify an applicant for employment)? Yes No If Yes, explain

Is there any reason you cannot perform the essential functions of the position/ positions for which you are applying? Yes No If Yes, explain:

Do you now have Hepatitis A, Salmonella, Typhus, TB or any other illness that can be spread by serving or preparing food? Yes No If Yes, explain:

EMPLOYMENT INFORMATION/HISTORY

Please provide your complete work history for the preceding three employers with the most recent first. Include military service, if applicable. We encourage you to attach a resume, but it may not take the place of information on this application.

EMPLOYER 1: _____

Business

Phone

No:

Supervisor's

Name: May we contact them? Yes No

Starting Date: _____ Leaving Date:

Starting Salary: _____ Ending Salary: _____

EMPLOYER 2: _____

Business _____ Phone _____ No:
Supervisor's _____ Name: May we contact them? Yes No
Starting Date: _____ Leaving Date: _____
Starting Salary: _____ Ending Salary: _____

EMPLOYER 3: _____

Business _____ Phone _____ No:
Supervisor's _____ Name: May we contact them? Yes No
Starting Date: _____ Leaving Date: _____
Starting Salary: _____ Ending Salary: _____

Have you ever been fired? Yes No If Yes, please explain: _____

EDUCATION HIGH SCHOOL / G.E.D.

Attended: Yes No Graduated? Yes No Year of Completion/ Expected to complete: _____

COLLEGE / UNIVERSITY / TECHNICAL / VOCATIONAL

Attended: Yes No Graduated? Yes No Year of Completion/ Expected to complete: _____

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

If you have any questions regarding the following statements, please ask for assistance.

I declare that I am qualified to perform all the duties of the position I am seeking. I also declare that the information I have provided on this application is true and correct and that any false statements or omissions will justify my rejection or dismissal. I authorize **Blazin' Mongolian BBQ** to (1) contact any of my previous employers as well as any reference source to verify the facts and information that I have furnished regarding my qualifications and my character; (2) obtain convictions; (3) obtain information from educational institutions concerning my educational record, conduct, and skills; and (4) obtain information concerning my credit history from credit reporting agencies, financial institutions, and other sources.

I authorize any person(s) having knowledge to provide such information to **Blazin' Mongolian BBQ** and release from liability and agree to hold harmless any person that furnishes such information in good faith. If I am employed, I agree to abide by rules, procedures, and policies as modified from time to time, including any drug-free workplace policies.

If employed by **Blazin' Mongolian BBQ** I understand that I will be an employee at will and that **Blazin' Mongolian BBQ** or myself may terminate at my employment with **Blazin' Mongolian BBQ** at any time for any reason whatsoever. I understand that no supervisor or manager may alter or amend the above conditions. Only the owner of **Blazin' Mongolian BBQ** has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

If I am employed, I understand that I will be asked to sign a Federal I-9 form and to provide positive proof of my identity and verification of my right to live and work in the United States. Finally, I understand that this is not only an application for employment and an offer of nor contract of employment and no part of this application shall be construed as an offer of employment or an employment contract.

Applicant's Signature _____

Printed Name _____

Date _____