



EMPLOYMENT APPLICATION

The employer of each independently owned and operated Café Yumm! restaurant affirms the right of all individuals to equal opportunity in employment without regard to race, color, religion, sex, age, handicap or disability, national origin, military status, marital status, sexual orientation, or any other basis prohibited by federal or state law.

**Please answer all questions below and check the applicable box even if you are attaching a resume.
If an item does not apply enter "n/a".**

PERSONAL INFORMATION										
DATE OF APPLICATION:			Do You Have Soc. Sec. #: Y or N				Do You Have Driver License: Y or N			STATE:
LAST NAME:		FIRST:	M.I.:	HM PHONE:			WK PHONE:			
OTHER PHONE:		<input type="checkbox"/> MESSAGE	<input type="checkbox"/> CELL PHONE	EMAIL ADDRESS:						
MAILING ADDRESS:				CITY:		STATE:		ZIP:		
PERMANENT ADDRESS (if different):				CITY:		STATE:		ZIP:		
ARE YOU LESS THAN 18 YEARS OF AGE? <small>(Regulations prohibit use of some equipment by those under 18)</small>				<input type="checkbox"/> Yes <input type="checkbox"/> No		HAVE YOU BEEN CONVICTED OF A FELONY? <input type="checkbox"/> Yes <input type="checkbox"/> No				
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.? <small>(Proof of U.S. citizenship or immigration status will be required if hired.)</small>				<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, on separate sheet, list convictions that are a matter of public record (arrests are not convictions). A conviction will not necessarily disqualify you for employment.				
WORK SCHEDULE AVAILABILITY										
<input type="checkbox"/> PERMANENT			<input type="checkbox"/> TEMPORARY			<input type="checkbox"/> EITHER			DATE YOU CAN START:	
<input type="checkbox"/> FULL TIME			<input type="checkbox"/> PART TIME			<input type="checkbox"/> EITHER			WAGE EXPECTED:	
SPECIFY HOURS AVAILABLE		MON	TUE	WED	THU	FRI	SAT	SUN		
EDUCATION / TRAINING HISTORY List high school, colleges, military, trade, business, or other schools attended.										
NAME & LOCATION OF SCHOOL COLLEGE OR UNIVERSITY		COURSE OF STUDY MAJOR		HOW LONG ATTENDED?	DID YOU GRADUATE?		DEGREE OR CERTIFICATE RECEIVED			
					<input type="checkbox"/> Yes <input type="checkbox"/> No					
					<input type="checkbox"/> Yes <input type="checkbox"/> No					
					<input type="checkbox"/> Yes <input type="checkbox"/> No					
SPECIALIZED SKILLS AND KNOWLEDGE										
Please list any other employment, voluntary work, or personal projects that you think may be related to the job you are applying for.										
REFERENCES										
Please provide the names of three references other than friends or family whom you have known for at least one year.										
NAME:		CITY:	ST:	PHONE:		YEARS KNOWN:		HOW KNOWN:		
NAME:		CITY:	ST:	PHONE:		YEARS KNOWN:		HOW KNOWN:		
NAME:		CITY:	ST:	PHONE:		YEARS KNOWN:		HOW KNOWN:		
GENERAL QUESTIONS										
DO YOU KNOW ANY CURRENT OR PREVIOUS EMPLOYEES OF CAFÉ YUMMI? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, WHO?										
IS THERE ANY PARTICULAR REASON THAT YOU APPLYING AT CAFÉ YUMMI? <input type="checkbox"/> Yes <input type="checkbox"/> No										
DO YOU HAVE A CURRENT FOOD SERVER'S PERMIT? <input type="checkbox"/> Yes <input type="checkbox"/> No					HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS?					
DO YOU HAVE A CURRENT OLCC SERVER'S PERMIT? <input type="checkbox"/> Yes <input type="checkbox"/> No					HOW LONG DO YOU PLAN TO STAY IN THIS CITY?					
CAN YOU LIFT 50 LB. ITEMS AS PART OF YOUR JOB? <input type="checkbox"/> Yes <input type="checkbox"/> No					LIST THREE WORDS THAT YOU FEEL BEST DESCRIBE YOURSELF:					
HAVE YOU EVER WORKED IN A TEAM ENVIRONMENT? <input type="checkbox"/> Yes <input type="checkbox"/> No					WHAT WAS YOUR FAVORITE JOB & WHY?					
HAVE YOU EVER WORKED INDEPENDENTLY? <input type="checkbox"/> Yes <input type="checkbox"/> No					WHAT WAS YOUR LEAST FAVORITE JOB & WHY?					
LIST YOUR SHORT TERM GOAL(S)? (6-12 MONTHS)					WHAT IS A PET PEEVE OF YOURS?					
LIST YOUR LONG TERM GOAL(S)? (5-10 YEARS)					LIST HOBBIES/LEISURE ACTIVITIES:					
HAVE YOU EVER EATEN AT A CAFÉ YUMMI? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, WHAT DID YOU HAVE?										
WHAT ARE YOUR FAVORITE FOODS OR TYPES OF FOOD?										
WHAT ARE YOUR <u>LEAST</u> FAVORITE FOODS OR TYPES OF FOOD?										



WORK HISTORY

JOB NUMBER 1: (current or most recent job)		NAME OF BUSINESS:		CITY & STATE:	
TYPE OF BUSINESS:			YOUR JOB TITLE:		
DUTIES PERFORMED AT THIS JOB:					
SUPERVISOR'S NAME:		PHONE:		MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	
FROM (MONTH & YEAR):		TO (MONTH & YEAR):		TOTAL TIME IN POSITION:	
AVG. HOURS WORKED/ WEEK:		SUPERVISION / LEADWORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):			
<input type="checkbox"/> Assign and Review work		<input type="checkbox"/> Handle Disciplinary problems		<input type="checkbox"/> Hire others	
<input type="checkbox"/> Rate Work Performance		<input type="checkbox"/> Respond to Grievance		<input type="checkbox"/> Recommend Hiring	
If you checked any of these boxes, list the number of employees: _____					
ENDING WAGE:		REASON FOR LEAVING:			

JOB NUMBER 2:		NAME OF BUSINESS:		CITY & STATE:	
TYPE OF BUSINESS:			YOUR JOB TITLE:		
DUTIES PERFORMED AT THIS JOB:					
SUPERVISOR'S NAME:		PHONE:		MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	
FROM (MONTH & YEAR):		TO (MONTH & YEAR):		TOTAL TIME IN POSITION:	
AVG. HOURS WORKED/ WEEK:		SUPERVISION / LEADWORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):			
<input type="checkbox"/> Assign and Review work		<input type="checkbox"/> Handle Disciplinary problems		<input type="checkbox"/> Hire others	
<input type="checkbox"/> Rate Work Performance		<input type="checkbox"/> Respond to Grievance		<input type="checkbox"/> Recommend Hiring	
If you checked any of these boxes, list the number of employees: _____					
ENDING WAGE:		REASON FOR LEAVING:			

JOB NUMBER 3:		NAME OF BUSINESS:		CITY & STATE:	
TYPE OF BUSINESS:			YOUR JOB TITLE:		
DUTIES PERFORMED AT THIS JOB:					
SUPERVISOR'S NAME:		PHONE:		MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	
FROM (MONTH & YEAR):		TO (MONTH & YEAR):		TOTAL TIME IN POSITION:	
AVG. HOURS WORKED/ WEEK:		SUPERVISION / LEADWORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):			
<input type="checkbox"/> Assign and Review work		<input type="checkbox"/> Handle Disciplinary problems		<input type="checkbox"/> Hire	
<input type="checkbox"/> Rating Work Performance		<input type="checkbox"/> Responding to Grievance		<input type="checkbox"/> Recommend Hiring	
If you checked any of these boxes, list the number of employees: _____					
ENDING WAGE:		REASON FOR LEAVING:			

Before signing below, please review this application to make sure you have answered all questions.

CERTIFICATION AND SIGNATURE

• I understand that any statement, verbal or written, made by me or by others at my request, contained in this application or attached materials, or in the course of any related employment process, that is false, fraudulent or misleading, will result in rejection of my application, denial of employment, or if hired, dismissal from employment if discovered after employment. • I understand that, if hired, I may be required to sign a confidentiality and/or non-compete agreement. • I understand that nothing contained in this application, or conveyed during any interview that may be granted, is intended to create an employment contract. • I certify that all statements contained herein are true and complete whether made by me or others at my request. • I understand that if hired, I must prove that I am legally authorized to work in the United States. • I understand that filling out this form does not indicate there is a position open and does not obligate employer to hire me. • I authorize employer to investigate my background, references, employment record, education information, and other matters related to my suitability for employment. • I understand that I will be required to provide my driving record if the position for which I am applying requires driving. • I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by employer to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, and previous employers of any and all claims for providing such information. • I understand that I may be asked to submit to a pre-employment drug test, a credit history check, and/or a criminal history background check as a condition of employment. • I understand and agree that, if hired, my employment is at-will, which means that it is for no specified period and may be terminated by me or employer at any time without prior notice for any reason. • I release employer and all providers of information from any liability as a result of furnishing and receiving any information related to the hiring process.

SIGNATURE (MUST BE IN INK):

DATE:

This application may be dropped off at any Café Yumm! restaurant. Each Café Yumm! is independently owned and operated.