



**DATE OF APPLICATION**

MONTH	DAY	YEAR

**EMPLOYMENT APPLICATION**

- It is the company's policy to provide equal opportunity in conformance with all applicable laws.
- In accordance with the immigration Reform and Control act of 1986, any offer of employment is upon satisfactory proof of applicant's identity and legal ability to work in the United States.

**PERSONAL INFORMATION**

NAME: LAST	FIRST	MIDDLE	HOME PHONE ( )	CELL PHONE ( )
ADDRESS			CITY	STATE
			ZIP CODE	DAYTIME/MESSAGE ( )
IF YOU ARE UNDER 18 YEARS OF AGE, CAN YOU PROVIDE PROOF OF ELIGIBILITY TO WORK? YES ___ NO ___ NOT APPLICABLE ___				

**EMPLOYMENT DESIRED**

WHAT TYPE OF WORK ARE YOU INTERESTED IN?	WAGE DESIRED?
ARE YOU CURRENTLY EMPLOYED? YES ___ NO ___	IF SO MAY WE CONTACT YOUR PRESENT EMPLOYER? YES ___ NO ___

**AVAILABILITY**

ARE THERE ANY HOURS, SHIFTS, OR DAYS YOU CANNOT OR WILL NOT WORK? YES ___ NO ___	WILL YOU WORK OVERTIME IF ASKED? YES ___ NO ___
IF YES, WHEN?	

Please indicate the times you are available for work each day.

DAY	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From							
To							

Total Hours available per week: \_\_\_\_\_

Work schedules may vary from week to week and occasionally employees are asked to stay late, leave early, or come in on scheduled day off.

**GENERAL INFORMATION**

HAVE YOU OR ANY OF YOUR FAMILY MEMBER OR A RELATIVE, CURRENTLY EMPLOYED OR WORKED AT ANY OTHER POKE DELIGHT LOCATIONS? YES ___ NO ___	
IF YES, WHEN:	WHERE:
SUPERVISORS NAME:	REASON FOR LEAVING:
ARE YOU ABLE TO PERFORM ALL THE ESSENTIAL FUNCTIONS OF THE JOB WITH OR WITHOUT REASONABLE ACCOMMODATIONS FOR WHICH YOU ARE APPLYING? YES ___ NO ___	
HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE PAST SEVEN YEARS? A "YES" answer does not automatically disqualify you from employment with the company. YES ___ NO ___ If yes, please describe in full.	
IF OFFERED EMPLOYMENT, CAN YOU PROVIDE PROOF OF ELIGIBILITY TO WORK IN THE UNITED STATES PRIOR TO STARTING WORK? YES ___ NO ___	

**EDUCATIONAL HISTORY**

SCHOOL	NAME / CITY AND STATE	LEVEL OR YEARS COMPLETED	MAJOR	TYPE OF DEGREE OR CERTIFICATE
HIGH SCHOOL		1 2 3 4		
COLLEGES / OTHER SCHOOLS		1 2 3 4		
COLLEGES / OTHER SCHOOLS		1 2 3 4		

**An equal Opportunity Employer**

## EMPLOYMENT HISTORY

PLEASE READ CAREFULLY: BEGIN WITH PRESENT OR MOST RECENT EMPLOYER AND LIST ALL JOBS YOU HAVE HELD FOR THE PAST TEN YEARS. INCLUDE ANY RELEVANT VOLUNTEER WORK EXPERIENCE. ACCOUNT FOR PERIODS OF UNEMPLOYMENT IN THE SPACE PROVIDED BELOW. YOU MAY ATTACH A RESUME, HOWEVER THE APPLICATION MUST BE COMPLETED IN FULL.

FROM MO      YR	TO MO      YR	EMPLOYERS NAME		
COMPLETE ADDRESS (STREET NO, CITY, STATE, AND ZIP CODE)				
STARTING PAY \$      PER	ENDING PAY \$      PER	YOUR JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE # (   )

FROM MO      YR	TO MO      YR	EMPLOYERS NAME		
COMPLETE ADDRESS (STREET NO, CITY, STATE, AND ZIP CODE)				
STARTING PAY \$      PER	ENDING PAY \$      PER	YOUR JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE # (   )

FROM MO      YR	TO MO      YR	EMPLOYERS NAME		
COMPLETE ADDRESS (STREET NO, CITY, STATE, AND ZIP CODE)				
STARTING PAY \$      PER	ENDING PAY \$      PER	YOUR JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE # (   )

### PLEASE EXPLAIN ANY PERIODS OF UNEMPLOYMENT:

FROM: MO      YR	TO: MO      YR	HOW DID YOU SPEND YOUR TIME ?
FROM: MO      YR	TO: MO      YR	HOW DID YOU SPEND YOUR TIME ?

## DRUG AND ALCOHOL POLICY

THE COMPANY HAS A VITAL INTEREST IN MAINTAINING A DRUG AND ALCOHOL FREE ENVIRONMENT FOR ITS EMPLOYEES, CUSTOMERS AND VISITORS. THEREFORE, THE COMPANY PROHIBITS THE USE OF, POSSESSION OF, DISTRIBUTION OF, PURCHASE OR SALE OF, OFFERING TO PURCHASE OR SELL, TRANSFER OF, TRAFFICKING IN, AND WORKING OR REPORTING FOR WORK UNDER THE INFLUENCE OF, INTOXICANTS, DRUGS OR CONTROLLED OR ILLEGAL SUBSTANCES. APPLICANTS FOR EMPLOYMENT MAY UNDERGO A POST-OFFER, PRE-EMPLOYMENT DRUG AND ALCOHOL SCREENING AS A CONDITION OF EMPLOYMENT. RESULTS OF SUCH TESTS WILL BE KEPT CONFIDENTIAL IN ACCORDANCE WITH APPLICABLE LAWS.

## PLEASE READ AND SIGN BELOW

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND AGREE TO HAVE ANY OF THE STATEMENTS CHECKED BY THE COMPANY UNLESS I HAVE INDICATED TO THE CONTRARY. I AUTHORIZE THE REFERENCES LISTED ABOVE TO PROVIDE THE COMPANY WITH ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THAT THEY MAY HAVE. FURTHER, I RELEASE ALL PARTIES AND PERSONS FROM ANY AND ALL LIABILITY FOR ANY DAMAGES THAT MAY RESULT FROM FURNISHING SUCH INFORMATION TO THE COMPANY AS WELL AS FROM THE USE OR DISCLOSURE OF SUCH INFORMATION BY THE COMPANY OR ANY OF IT'S AGENTS, EMPLOYEES, OR REPRESENTATIVES. I UNDERSTAND THAT ANY MISREPRESENTATION, FALSIFICATION, OR MATERIAL OMISSION OF INFORMATION ON THIS APPLICATION MAY RESULT IN MY FAILURE TO RECEIVE AN OFFER OR, IF I AM HIRED, IN MY DISMISSAL FROM EMPLOYMENT.

I UNDERSTAND THAT ACCEPTANCE OF AN OFFER OF EMPLOYMENT DOES NOT CREATE A CONTRACTUAL OBLIGATION UPON THE EMPLOYER TO CONTINUE TO EMPLOY ME IN THE FUTURE. I UNDERSTAND THAT EMPLOYMENT WITH THE COMPANY IS "AT-WILL" MEANING THAT THE TERMS AND CONDITIONS OF EMPLOYMENT MAY BE CHANGED WITH OR WITHOUT NOTICE, WITH OR WITHOUT CAUSE, INCLUDING BUT NOT LIMITED TO, TERMINATION, DEMOTION, PROMOTION, COMPENSATION, BENEFITS, DUTIES, AND LOCATION OF WORK. I UNDERSTAND THAT NO REPRESENTATIVE OF THE COMPANY HAS THE AUTHORITY TO MAKE ASSURANCES TO THE CONTRARY.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_