

CASA RAMOS
APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

- Are you eligible to work in the U.S? ___Yes ___No
- Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) ___Yes ___No
- Have you ever been terminated from employment or asked to resign by an employer? ___Yes ___No
If yes, please provide company names and details _____
- Can you work any shift? ___Yes ___No If no, explain _____
- Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___Yes ___No
- Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain. _____

• What languages do you speak? (circle)

English	Spanish	Other _____
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EMPLOYMENT DESIRED

- Circle location(s) you would like to apply

Yreka	Mt. Shasta	Redding	Red Bluff	Corning	Willows
Chico-Fair St	Chico-East Ave	Lincoln	Natomas	Rancho Cordova	Corporate

- Circle Position(s) you would like to apply

Dishwasher	Busser	Host/Hostess	Server/Bartender	Cook
Prep Cook	Assistant Manager	General Manager	Area Manager	Corporate

REFERRAL SOURCE

- How did you hear of us? (circle)

Indeed	Social Media	Website	Walk-In	Referred by: _____
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- Have you ever worked for this company before? ___Yes ___No If yes, where/when? _____
- Do you know anyone who works for our company? ___Yes ___No If yes, who? _____

EMPLOYMENT HISTORY Include your last (5) years of employment history, starting with the most recent. Incomplete information could disqualify you from further consideration. Use additional sheet if necessary.

- If employed, may we inquire of your present employer? ____ Yes ____ No

Name of Employer:		From:	To:
Title:		Reason for leaving:	
Job Duties:			
May we contact	____ YES ____ NO	Supervisor Name/Phone	

Name of Employer:		From:	To:
Title:		Reason for leaving:	
Job Duties:			
May we contact	____ YES ____ NO	Supervisor Name/Phone:	

Name of Employer:		From:	To:
Title:		Reason for leaving:	
Job Duties:			
May we contact	____ YES ____ NO	Supervisor Name/Phone:	

Name of Employer:		From:	To:
Title:		Reason for leaving:	
Job Duties:			
May we contact	____ YES ____ NO	Supervisor Name/Phone	

Please read carefully before signing

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

_____ In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.