



Engel Management Services Employment Application

DATE: _____

CONCEPT/LOCATION: _____

Complete in your own handwriting in ink. If employed, this becomes part of your permanent record. Engel Management Services (EMS) consider applicants for all positions without regard to race, color, religion, gender, marital status, national origin, age (40 and over), disability, the presence of non-job related medical conditions, or any other basis prohibited by state or federal laws. Employment with EMS related entities is at will. All questions must be answered and the application signed to be considered for employment.

Tell us about yourself.

Name: _____ (Last) _____ (First) _____ (Middle Initial) _____ (Social Security #)

Present Address: _____ (Street) _____ (City) _____ (State) _____ (Zip)

E-mail Address: _____ Cell Phone: () _____

Day Phone: () _____ Night Phone: () _____

Are you at least 18 years of age? Yes No If no, state your date of birth: ____/____/____

Are you at least 16 years of age? Yes No (You must be at least 16 years of age to work for EMS)

Have you ever been employed by EMS restaurants or offices? Yes No

If yes: Location _____ Dates from: ____/____/____ To: ____/____/____

Reason for Leaving: _____

Can you furnish proof of your right to work in the U.S.A? Yes No

Do you have reliable transportation to work? Yes No

Have you been convicted of a felony in the past (7) years? Yes No

If yes, list convictions that are a matter of public record indicating date, charge, place and action taken (arrests are not convictions). A conviction(s) will not necessarily disqualify an applicant for employment. Use additional paper if necessary: _____

What position interests you?

Position Application for: Server Line Cook Dish Room Bartender
 Driver Host Prep Cook Other (explain) _____

Total hours available per week: _____ Hourly rate desired: _____ Date you can start: _____

◆ Our work week is Thursday through Wednesday – working hours range from 6 am to Midnight.

◆ Please fill in the hours you are available to work each week:

Available Hours	Thursday:	Friday:	Saturday:	Sunday:	Monday:	Tuesday:	Wednesday:
From:	_____	_____	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____	_____	_____

Special Skills

Describe any specialized training, apprenticeship and/or skills which relate to your ability to perform the job for which you have applied: _____

Describe your education.

Name and Location of School:	Circle last year completed:	Did you graduate?	Course / Major:	Degree:
High School: _____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
College: _____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other (Specify): _____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

Engel Management Services is an Equal Opportunity Employer.

Previous Job Experience (Please give accurate and complete employment history, starting with your most recent job.)

	Job 1 (most recent):	Job 2:	Job 3:
Company Name:	_____	_____	_____
Address:	_____	_____	_____
Phone Number:	_____	_____	_____
Employment Dates:	From: _____ To: _____	From: _____ To: _____	From: _____ To: _____
Job Title:	_____	_____	_____
Hourly Pay:	_____	_____	_____
Manager's Name:	_____	_____	_____
Reason for Leaving:	_____	_____	_____

References We Can Contact (Please provide at least 1 (B)usiness and 1 (P)ersonal references)

(circle)	Name:	Relationship:	Phone #:	Address:
B / P	_____	_____	_____	_____
B / P	_____	_____	_____	_____
B / P	_____	_____	_____	_____

Comments

This space is provided for your use in giving us any information about yourself not already covered in the application. (e.g. career interests, plans, objectives or any other information that you believe we should know in considering you for this position)

Acknowledgement (Please read the following.)

I declare that I am qualified to perform all duties of the position I am seeking and the statements I have made in this application are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or omissions made in connection with my application may be grounds for rejection of my application or termination in the event of employment.

I authorize EMS to conduct background investigations for information regarding employment, criminal, personal, credit, military and/or educational background investigations in the manner and to the extent deemed necessary and appropriate. I authorize release of such information and further release EMS to respond to any reference checks as requested by any potential employers. I release EMS from any liability in connection with any employment investigations or references.

I understand that EMS does not offer contracts of employment; therefore, any employment relationship is of an **"at will"** nature, which means that both EMS and I have the right to terminate the employment relationship at any time with or without cause. I further understand that nothing said or written creates a contract of employment or a contract for the provision of any benefit.

I understand that EMS does not subscribe to workers' compensation insurance. I understand that I am not to lift any object unless I am familiar with the given situation and am reasonably sure that doing so alone can be safely accomplished. Otherwise, I know that it will be my duty to refrain from lifting the object until I have obtained assistance. I also agree to report immediately to my manager any and all job related incidents resulting in injury or illness. I understand that failure to report such incidents before the end of the work periods in which such incidents occurred may cause the EMS not to render voluntary payment of any resulting medical claim(s).

I understand that, if required, I will need to attain and provide certain licenses or health certificates. As a condition of employment, I will have to pass a drug test, if and when required.

If employed, I agree to abide by the policies, procedures, rules and regulations. I acknowledge the right for EMS to revise, at any time, its policies, procedure, rules and regulations and I agree to abide by and be governed by such revisions.

If employed, I agree that EMS may withhold pay from my paycheck for any legal debt that I may owe during my employment or at termination.

I understand that any offer by or actual employment with EMS is conditioned upon my agreement to abide by EMS's Alternative Dispute Resolution Policy. This policy is for disputes arising from application of employment, employment or termination of employment, and I agree to submit any and all claims or controversies to arbitration as outlined in the policy.

Finally, I understand that this application will only be considered for 90 days and that if I have not heard from Engel Management Services within that time period, I must reapply to be considered further.

_____ Signature of Applicant _____ Date

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