



Employment Application



APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Location Applied for (check all that applies)		1. Westgate <input type="checkbox"/> (Glendale)			
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	



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PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

AVAILABILITY (BETWEEN 10 AM – 11 PM)							
	MON	TUE	WED	THURS	FRI	SAT	SUN
From							
To							

WHY DO YOU WANT TO WORK AT CRAVE

DISCLAIMER AND SIGNATURE

- a) I certify that I have read and fully completed all pages of this application and that the information contained in this application is correct to the best of my knowledge.
- b) I understand that any omission or erroneous information in this application or furnished during interview is grounds for dismissal in accordance with Carve’s employment policies.
- c) I authorize all references listed in this application to provide any and all information concerning my previous employment as well as pertinent information they may have. I release all parties from all liabilities for any damages that may result from furnishing the aforementioned information.
- d) I acknowledge that Crave reserves the right to amend or modify the policies in its Employee Handbook as well as other policies at any time, without prior notice.
- e) I certify that I meet all requirements and qualifications required to perform this job.
- f) At Crave, my employment is at-will.
- g) If this application leads to employment, I understand that the employer may require me to obtain Food Handling Certificate and other certifications from appropriate government authorities.
- h) I understand that I may be asked to go for Drug Test and Background Test before being hired or during the course of employment with Crave.

SIGNATURE

DATE

*Crave is an Equal Opportunity Employer.
The information requested in this application will not be used for any purpose prohibited by the law.*