

EMPLOYMENT APPLICATION

Please print or type. The application must be fully completed to be conceded. Please complete each section, even if you attach a resume.

Personal Information									
Full Name:				Date:					
	Last	First			М.І.				
Address:	-								
	Street Address					Apartment/Unit #			
	City				State	ZIP Code			
Phone:			Email						
Date Available:				Desired Hourly/ Salary: <u>\$</u>					
Position App	olying For								
Are you a citizen of the United States?									
Have you ev	ver worked for this company?	YES NO	lf yes,	when?					
Have you ev	ver been convicted of a felony?	YES NO							
lf yes, expla	in:								
		Ed	ucation						
High School	l:	Addres	ss:						
From:	То: С)id you graduat	YES	NO □	Diploma:				
College:		Addre	ss:						
From:	То: С)id you graduat	YES	NO □	Degree:				
Other:		Addre	ss:						
From:	To: D)id you graduat	YES e?□	NO	Degree:				

References

Please list three professional references.	
Full Name:	Relationship:
Company:	Dhanas
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
	Previous Employment
Company:	Phone:
Address:	Supervisor:
Job Title:	
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for	YES NO a reference?
Company:	Phone:
Address:	Supervisor:
Job Title:	
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for	YES NO a reference?

Company:										
Job Title:										
Responsibilities:										
From: To:	Reason fo	or Leaving:								
May we contact your previous supervisor for a reference?	YES	NO □								
Military Service										
Branch:		From:		То:						
Rank at Discharge:	Type of Discharge:									
If other than honorable, explain:										
Disclaimer and Signature										

WAIVERS AND DISCLOSURES

Please read each section carefully and sign where indicated.

AT-WILL EMPLOYMENT

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or a promise of future benefits by this organization. I understand and agree that if hired, my employment will be at-will in nature and may be terminated, with or without cause, at any time, by either myself, or my employer. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of this organization.

CERTIFICATION OF TRUTH AND ACCURACY

I certify that the information in this application is true, complete, and correct. I understand that false answers, statements, or signification omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

NOTIFICATION AND AUTHORIZATION TO CONDUCT BACKGROUND INVESTIGATION

I authorize all individuals, schools, and employers named, except as specifically limited on this application, to provide information requested about me, and I release them from liability for damages in providing this information. I understand and acknowledge that FrogLegs KCA is entitled to rely on representations made by me in the hiring process, and therefore I understand and acknowledge that any misrepresentation or omission of fact by me can result in immediate discharge if deemed appropriate by FrogLegs KCA. I understand that passing the background check is a condition of employment. A negative background check can be grounds for dismissal, even if an offer has been made to me and I have been hired.

NON-DISCRIMINATION POLICY

FrogLegs KCA is an equal opportunity employer and complies with all laws prohibiting discrimination on the bases of sex, gender, race, color, creed, religion, ancestry, marital status, national origin, disability, veteran status, or any other protected characteristic.

Name (Please Print):

Signature:

Date: