



FOOD PEOPLE. FROM THE INSIDE OUT.
GOODEGGDINING.COM

Please completely fill out this application. Failure to complete all sections may disqualify you from consideration for employment.

EMPLOYMENT APPLICATION _____

TODAY'S DATE

PLEASE PRINT IN BLUE INK

Name of Concept and City Location			Position(s) Desired	Hours Available to Work
Last	First	Middle Initial	Full Time <input type="checkbox"/>	Rate of Pay Desired
			Part Time <input type="checkbox"/>	
Street Address		Apt.	If hired can you submit proof of legal right to work in the US?	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
City	State	Zip	Phone Number Please Indicate Home _____ Office _____ Mobile _____ ()	
Email Address			Phone Number Please Indicate Home _____ Office _____ Mobile _____ ()	

PREVIOUS EMPLOYMENT HISTORY

LIST ALL OF YOUR POSITIONS FOR THE PAST 10 YEARS; MOST RECENT EMPLOYER FIRST. USE ADDITIONAL SHEET IF NEEDED.

(1) EMPLOYER (most recent)				(2) EMPLOYER			
Address	City	State	Zip	Address	City	State	Zip
Dates Employed		Supervisor		Dates Employed		Supervisor	
From:	To:			From:	To:		
Positions Held		Telephone		Positions Held		Telephone	
Duties		Rate of Pay		Duties		Rate of Pay	
Reason for Leaving – May We Contact? _____yes _____no				Reason for Leaving			
(3) EMPLOYER				(4) EMPLOYER			
Address	City	State	Zip	Address	City	State	Zip
Dates Employed		Supervisor		Dates Employed		Supervisor	
From:	To:			From:	To:		
Positions Held		Telephone		Positions Held		Telephone	
Duties		Rate of Pay		Duties		Rate of Pay	
Reason for Leaving				Reason for Leaving			

PAGE 2: Please completely fill out this application. Failure to complete all sections may disqualify you from consideration for employment.

- DO YOU HAVE ANY RELATIVES WITH OUR COMPANY? YES NO
- IF YES, LIST NAMES AND POSITIONS _____
- HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO
- IF YES PLEASE LIST THE DATE, PLACE, CHARGE, AND DEPOSITION: _____

*You need not disclose a conviction a) that was judicially expunged or sealed b) for a marijuana-related offense over 2 years old c) if you completed a pre or post trial diversion program or d) for a misdemeanor for which probation was successfully completed (or discharged) and the case was judicially dismissed. A conviction will not necessarily be a bar to employment.

EDUCATION

HIGHEST GRADE COMPLETED: _____ COLLEGE _____

DEGREE(s)/ LICENSE(s) HELD _____

NAME OF LAST SCHOOL ATTENDED _____

OTHER TRAINING OR TRADE SCHOOL _____

WHICH COMPUTER PROGRAMS and/or POINT OF SALE SYSTEM CAN YOU OPERATE? _____

OTHER KNOWLEDGE, SKILLS, OR ABILITIES _____

PERSONAL REFERENCES

List the two individuals who will act as personal references. Do not list family members.

Name	Telephone	Relationship
1. _____	_____	_____
2. _____	_____	_____

REFERRAL SOURCE

How did you hear about the position you are applying for: Internet _____ Newspaper _____ Friend _____ Other _____

If you were referred by an employee, please print their name here: _____

ACKNOWLEDGEMENTS

PLEASE READ CAREFULLY, *INITIAL EACH PARAGRAPH* AND SIGN BELOW.

____ I certify that the statements I have made on this application are true and correct. I understand that any misrepresentations made in this application will be sufficient cause for denial of employment with or discharge from The Company. I understand that nothing contained in this application, or the granting of an interview, is intended to be a contract of employment. I also understand that employment with The Company is "at-will" and that either of us may terminate the relationship at any time, for any reason, with or without cause. I certify that if employed by The Company, I will abide by all company rules and regulations.

____ I authorize The Company to investigate my background to determine my suitability for employment and use of any information lawfully obtained for any employment-related purpose permitted by law. This investigation may include checking with the schools and employers I have identified, reviewing criminal conviction and driving records, and verifying any other relevant information about me. I release and waive any claims I may have against and indemnify The Company and any of the schools, former employers and other persons or entities for any loss or injury I may sustain as a result of any disclosure made related to this application.

____ The use, possession, or being under the influence of illegal drugs or alcohol while on Company time is prohibited and will result in disciplinary action, up to and including termination of employment. I hereby agree to any lawful drug or integrity testing or post-offer medical examination that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I authorize any physician, hospital, laboratory or collection site to release to The Company the results of any test or examination or other information which may be necessary to determine my ability to perform the duties of a job for which I am being considered, prior to employment or in the future during my employment with The Company.

Date: _____ **Signature:** _____

