

APPLICATION FOR EMPLOYMENT

Grégoire

2109 Cedar street Berkeley CA 94709

Phone: 510-883-1893

www.gregoirerestaurant.com

GREGOIRE IS AN EQUAL OPPORTUNITY EMPLOYER. EQUAL ACCESS TO EMPLOYMENT IS AVAILABLE TO ALL PERSONS. ANY APPLICANT WITH A DISABILITY WHO REQUIRES REASONABLE ACCOMMODATION TO THE APPLICATION AND/OR INTERVIEW PROCESS SHOULD NOTIFY A REPRESENTATIVE IN THE HUMAN RESOURCES DEPARTMENT.

Position(s) applied for _____ Date of application _____

Name _____

LAST

FIRST

MIDDLE

Address _____

STREET

CITY

STATE

ZIP

Telephone # () _____ Mobile/Pager/Other # () _____

Email address _____

Are you under 18? Yes ___ No ___ if yes, can you furnish a work permit? Yes ___ No ___
If no permit, please explain _____

Have you been employed at Gregoire before? ___ Yes ___ No Are you legally entitled to work in this country? ___ Yes ___ No
IF HIRED, PROOF OF IDENTITY AND WORK AUTH. WILL BE REQUIRED.

Date available for work _____ Type of employment desired ___ Full-Time ___ Part-time ___ Temporary

Have you been convicted of a crime in the last ten (10) years? ___ Yes ___ No

If yes, please explain _____
CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FOR EMPLOYMENT.

How did you hear about the job opening at Gregoire? _____

EMPLOYMENT HISTORY

Provide the following information for your past four (4) employers, assignments or volunteer activities, starting with the most recent.

From	To	Employer	Telephone
Job Title		Address	
Supervisor and Title		Job Responsibilities	
Reason for Leaving		Hourly Rate Start \$	Final \$
From	To	Employer	Telephone
Job Title		Address	
Supervisor and Title		Job Responsibilities	
Reason for Leaving		Hourly Rate Start \$	Final
From	To	Employer	Telephone
Job Title		Address	
Supervisor and Title		Job Responsibilities	
Reason for Leaving		Hourly Rate Start \$	Final \$
From	To	Employer	Telephone
Job Title		Address	
Supervisor and Title		Job Responsibilities	
Reason for Leaving		Hourly Rate Start \$	Final \$

If you have another job or go to school please note the hours you will be available

day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
time							

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, and/or certificates that may qualify you to perform job-related functions of the position for which you are applying

EDUCATIONAL BACKGROUND

NAME AND LOCATION	YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY
		MAJOR	DEGREE	
HIGH SCHOOL				
COLLEGE				
OTHER				

REFERENCES

Please list 3 individuals, not related to you, whom you have known **through your work or related experience** for at least one (1) year.

NAME	TELEPHONE	YEARS KNOWN

I UNDERSTAND THAT IF I AM EMPLOYED, ANY MISREPRESENTATION OR MATERIAL OMISSION MADE BY ME ON THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION OR IMMEDIATE DISCHARGE FROM THE EMPLOYER'S SERVICE, WHENEVER IT IS DISCOVERED.

I GIVE THE EMPLOYER THE RIGHT TO CONTACT AND OBTAIN INFORMATION FROM ALL REFERENCES, EMPLOYERS, EDUCATIONAL INSTITUTIONS AND TO OTHERWISE VERIFY THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION. I HEREBY RELEASE FROM LIABILITY THE EMPLOYER AND ITS REPRESENTATIVES FOR SEEKING, GATHERING AND USING SUCH INFORMATION AND ALL OTHER PERSONS, CORPORATIONS OR ORGANIZATIONS FOR FURNISHING SUCH INFORMATION.

IF I AM HIRED, I UNDERSTAND THAT I AM FREE TO RESIGN AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE AND THE EMPLOYER RESERVES THE SAME RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, EXCEPT AS MAY BE REQUIRED BY LAW. THIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT OR CONTRACT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OR DEFINITE DURATION. I UNDERSTAND THAT NO REPRESENTATIVE OF THE EMPLOYER, OTHER THAN THE OWNER, HAS THE AUTHORITY TO MAKE ANY ASSURANCES TO THE CONTRARY AND THAT ANY AGREEMENT OTHER THAN EMPLOYMENT-AT-WILL MUST BE IN WRITING AND MUST BE SIGNED BY THE OWNER.

I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING AND SEEK EMPLOYMENT UNDER THESE CONDITIONS.

SIGNATURE OF APPLICANT _____ DATE _____