

187 Calle Magdalena Ste 105 Encinitas, CA 92024 Phone: 760-487-1540 Fax: 760-487-1541

www.robertos-sd.com

## **APPLICATION FOR EMPLOYMENT**

Roberto's Mexican Food is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of age, sex, sexual orientation, race, color, creed, religion, ethnicity, national origin, citizenship, disability, marital status or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances.

## PERSONAL INFORMATION

Last Name:	First Name:		Middle Initial:			
Address:						
	Street	City	S	State	Zip Code	
Primary Phone:	Othe	er Phone:				
Email:						
Are you over 21 years of age? (If this is a requirement of the job you are seeking)			N/A	Voc	No	
Are you over 18 years of age?			N/A	. Yes _ Yes	No No	
If hired, can you provide proof of eligibility to work in the U.S.?				Yes	No	
Have you worked for Roberto's Mexican Food before?				Yes	No	
If yes, please list dates of employment and position(s) held:						
Have you ever been convicted of a crime, misdemeanor, or felony?				Yes _	No	
If yes, describe conviction: _						
How did you hear about this o						
EDUCATION	Name and Address of School		Major	Diploma/Degree		
High School						
College/University						
Other Education/Training						
Are you enrolled in a local colle	ege university or other?			Yes	No	
Are you enrolled in a local college, university or other?  Yes No  Do you have any other experience, training, or skills that you feel would enhance your eligibility for						
eligibility for with our company						
g, ,						
EMPLOYMENT						
Type of employment desired:	Full-Time		Part-Time		Seasonal	
If you applying for seasonal w	ork, what period are you a	/ailable for?				
What days are you available to work? Th F S S M T W						
Would you be willing to work overtime if required?  Yes N				No		
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## **EMPLOYMENT HISTORY**

(May include voluntary non-paid experience. Include additional pages if necessary)

Employer:	
Address:	Telephone:
Date Started:	Date Left:
Starting Wage: per	_ Ending Wage: per
Starting Position:	Ending Position:
Name and Title of Supervisor:	
Brief Description of Duties:	
Reason for Leaving:	
Employer:	
Address:	Telephone:
Date Started:	Date Left:
Starting Wage: per	_ Ending Wage: per
Starting Position:	Ending Position:
Name and Title of Supervisor:	
Brief Description of Duties:	
Reason for Leaving:	
Employer:	
Address:	Telephone:
Date Started:	Date Left:
Starting Wage: per	_ Ending Wage: per
Starting Position:	Ending Position:
Name and Title of Supervisor:	
Brief Description of Duties:	
Reason for Leaving:	
I certify that the facts set forth in this Application for Employment am employed, false statements or omission of fact may result in listed above to obtain employment references. I understand that either the Company or I can terminate the employment relations without cause.  All applicants that are offered a position with Roberto's Mexican	Fication and Agreement  are true and complete to the best of my knowledge. I understand that if I my dismissal. I authorize Roberto's Mexican Food to contact the employers employment with Roberto's Mexican Food is "At -Will", which means that ship at any time, for any reason, with or without prior notice and with or Food must take a drug and alcohol test. May be required to undergo a check. Failure to complete any necessary consent forms or pass any checks II employment is continued on basis stated above only.

Applicant's Signature:

Date: \_\_\_\_\_