



Position Applied For: Location Applied For:

		Applicant	Information					
Full Name:					Date:			
Address:	Last	First		M.I.				
Address.	Street Address			Apartm	nent/Unit #			
	City			State	ZIP	Code		
Phone: ()	E-n	nail Address:	State	<u> —</u>			
Date Availab	Date Available: Social Security No.: Desired Salary: \$							
Position App	lied for:	V50 N0				\/50		
	izen of the United Stat er worked for DOMINI NGE?	CK'S / YES NO	If no, are you aut If yes, when?	thorized to worl	k in the U.S.?	YES	NO	
Have you <u>ev</u>	<u>er</u> been convicted of a	felony? YES NO						
If yes, explai	n:							
Education								
High School:	:	Address						
From:	To:	Did you graduate?	YES NO	Degree:				
College:		Address						
From:	To:	Did you graduate?	YES NO	Degree:				
Other:		Address						
From:	То:	Did you graduate?	YES NO	Degree:				
		Refe	erences					
Please list ti	hree professional refe	erences.						
Full Name:			Relationship:					
Company:				Phone: ()			
Address:								
Full Name:			Relationship:					
Company:				Phone: ()			
Address:								
Full Name:			Relationship:					
Company:			,	Phone: ()			
Address:				•	-			

PLEASE FULLY COMPLETE ALL SECTIONS

I understand consideration for employment with **DOMINICK'S / DOM'S LOUNGE** will be contingent upon the results of **reference and criminal background checks**. I authorize **DOMINICK'S / DOM'S LOUNGE** to investigate all information I provide on this application for employment, including previous employment, experience and educational credentials. I also give **DOMINICK'S / DOM'S LOUNGE** permission to contact my former employer(s), all listed references or any other person who can verify the information I provide on this application. I hereby authorize and direct my current and former employers and other contacted persons to respond to any questions pertaining to the information included on this application.

iignature	Date							
		Employment H	stor	у				
List ALL jobs held for la	ıst 10 years (attac	ch additional sheets if neces	sary) and e	xplain any	period	s without e	mployment
Company:					Phone:	()	
Address:				S	Supervisor:			
Job Title:		Starting Salary:	\$			Endii	ng Salary:	\$
Responsibilities:								
From:	To:	Reason for Leaving:						
May we contact your pr	evious supervisor	r for a reference?		NO				
Company:					Phone:	()	
Address:				S	upervisor:			
Job Title:		Starting Salary:	\$			Endi	ng Salary:	\$
Responsibilities:								
From:	To:	Reason for Leaving:						
May we contact your pr	evious supervisor	r for a reference?		NO				
Company:					Phone:	()	
Address:				S	upervisor:			
Job Title:		Starting Salary:	\$			Endi	ng Salary:	\$
Responsibilities:								
From:	To:	Reason for Leaving:						
May we contact your pr	evious supervisor	r for a reference?		NO				
		Military Serv	ice					
Branch:					From:		To:	
Rank at Discharge:			pe of Discharge:					
If other than honorable.	explain:							

DRIVER'S LICENSE & INSURANCE INFORMATION Fill out this section if applicable (delivery drivers)

State License Issued in:	License #	
Name of Insurance Company:	Policy #	
	Exp Date	
ve been subject to any disciplinary action, suspension or rent in detail below the reason:	evocation?	

Disclaimer and Signature

All employees, contractors and lessees are required to adhere to the **DOMINICK'S / DOM'S LOUNGE** Drug & Alcohol Policy. The information provided below is intended to be a brief summary of this policy and is not inclusive. All persons selected for employment with **DOMINICK'S / DOM'S LOUNGE** will receive a complete copy of the Drug & Alcohol policy. Our complete policy is also available for review upon request in our Human Resources Department.

I understand that **DOMINICK'S / DOM'S LOUNGE** maintains a **Drug & Alcohol-free workplace** and may require a drug & alcohol screening test as a condition of employment for specific job classifications. If I do not complete the pre-employment drug & alcohol testing within 24 hours of being offered a position for which pre-employment drug & alcohol testing is required or if I test positive, refuse to test or submit an adulterated specimen, I understand I will not be considered for employment. I further understand that if I am employed by **DOMINICK'S / DOM'S LOUNGE**, I may be required to submit to **random drug testing** if I am employed in a safety sensitive position. If I sustain a work related injury, I may be required to submit to post-accident drug testing if the circumstances surrounding the cause of such accident indicate that I was at fault or if it is unclear if I was at fault. **DOMINICK'S / DOM'S LOUNGE** may also conduct reasonable suspicion drug & alcohol testing during the course of my

DOMINICK'S / DOM'S LOUNGE may also conduct reasonable suspicion drug & alcohol testing during the course of my employment. Testing positive, refusing to test within the designated time period or submitting an adulterated specimen for any random, reasonable suspicion or post-accident drug & alcohol screening during my employment will be considered a voluntary resignation of such employment.

I understand that **DOMINICK'S / DOM'S LOUNGE** abides by an employment-at-will policy, which means either the company or the employee may terminate the employment relationship at anytime, for any reason or for no reason, with or without notice. Nothing contained in this employment application, any employee handbook or conveyed to me during an interview is intended to create an employment contract, implicit or implied. I also understand and agree that any future changes in my title, duties, compensation, working conditions, or company benefits, policies and/or procedures will not alter this at-will agreement. This at will agreement can only be changed or modified in writing by the Owner of DOMINICK'S / DOM'S LOUNGE. If I am applying for a position for which driving a vehicle is a mandatory job duty, I am required to possess a current and valid driver's license and I agree to provide **DOMINICK'S / DOM'S LOUNGE** with a certified copy of my driving record. I also understand that any offer of employment is contingent upon my overall driving record, and my ability to provide proof of automobile insurance. I certify that I completed this application for employment by myself and that all of the information provided herein is true. I understand that any omission, misstatement or inclusion of false information on this application or any documents used to secure employment with **DOMINICK'S / DOM'S LOUNGE** shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that this application is considered current for three months. If I wish to be considered for employment after this 3-month period, I must complete and submit a new employment application.

My signature below certifies that I have read and fully understand the information included on this application and agree to the terms and conditions outlined in this document.

Signature	Date

DOMINICK'S / DOM'S LOUNGE is an Equal Opportunity Employer. All qualified applicants will receive consideration without regard to race, color, religion, gender, gender identity, national origin, age, disability, veteran status, current employment status or any other status protected under local, state or federal law. DOMINICK'S / DOM'S LOUNGE does not require or demand an individual submit to take a lie detector or similar test unless specifically exempt from the Employee Polygraph Act of 1988.