



Established in 1959

Employment Application Form

Personal Information

Date:

Name: (Last Name, First Name, Middle Initial)	Social Security Number will be needed if hired
Present Address: City: State: Zip Code:	Permanent Address: City: State: Zip Code:
Home Phone Number:	Cell Phone Number:
Referred By? Relationship?	If under 18, please list age:

Employment Desired

Position:	Date you can start?	Salary desired?
Days/hours available to work: <input type="checkbox"/> No Preference <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	How many hours can you work weekly? Are you open to work in both Aunt Emma's locations? (Chula Vista and National City)	Are you employed now? If so, may we contact your current employer?

Education History

High School:	Did you graduate?	Location?	Degree/Diploma?
College:	Did you graduate?	Location?	Degree/Diploma?
Trade, Business, or Correspondence School?	Did you graduate?	Location?	Degree/Diploma?

Please list two references (not related to you whom we can contact)

Name:	Address:	Phone Number:	Years Known:
Name:	Address:	Phone Number:	Years Known:

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to

summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying:

Experience

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Date: Month/Year	Name and Address of Employer	Position/Duties	Reason for leaving (Be Specific)
From:			
To:			
From:			
To:			
From:			
To:			
From:			
To:			

Did you complete this application yourself Yes No If not, who did? _____

Authorization:

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disability Act (ADA) and other relevant federal and state laws.”

At-Will: There is no contract of employment between I and Aunt Emma’s and nothing anyone tells me, or anything I see written in policy documents, manuals or anywhere else constitutes one nor does it create an implied duty or contractual obligation between I and Aunt Emma’s.

Date: _____

Signature: _____

It is the policy at Aunt Emma’s Pancakes to not discriminate against any applicant for employment, or any employee because of age, color, sex, disability, national origin, race, religion, or veteran status.

-----Interview Process-----

Date: _____

Interviewed By: _____

Notes:

Managers Signature: _____