

# SPICE ROOM | Neighborhood Indian Bistro EMPLOYMENT APPLICATION

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Today's Date:

SPICE ROOM | Neighborhood Indian Bistro is an Equal Opportunity Employer. Applicants for employment will receive consideration without regard to race, color, national origin, religion, age, sex, physical or mental disability, marital status, veteran status, or any other reason protected under applicable federal, state or local law. Only provide information on this application that demonstrates your qualifications for the position you desire. If you require a reasonable accommodation to participate in the pre-employment process, please advise the Company's representative of your requested accommodation.

# PERSONAL INFORMATION

Last Name	First Name		M.I.	Email:					HOME PHONE: ( ) CELL PHONE: ( )				
Street Address	Box/Apt.	City		State		Zip			•	_Internet specify	Spice Room	Employee	
Have you ever been employed by SPICE ROOM   Neighborhood Indian Bistro? YesNo			If "Yes", please complete this line :Supervisor and Location:Mo. Yr.Mo. Yr.Date of Employment:/										
Bartender S	<b>ONLY):</b> Kitchen Server Host/Hostess	HOUE From To:		ED: on	Tues	S	Wed		Thu	Fri	Sat	Sun	

### **QUALIFICATIONS:**

Please list all education, training, or experience, which you feel relates to the position applied for which would help you to perform the work, such as schools, colleges, degrees, vocational or technical programs, or military training.

SPECIAL ACHIEVEMENT, EXPERIENCE OR TRAINING	DEGREE	EDUCATIONAL INSTITUTION

#### **EMPLOYMENT (LIST MOST RECENT JOB FIRST)**

COMPANY:	ADDRESS:	NAME OF SUPERVISOR:
		May we contact?
JOB TITLE:	DUTIES PERFORMED:	FROM:
		MONTH/YEAR
		TO:
		MONTH YEAR
STARTING PAY:	REASON FOR LEAVING:	PHONE NUMBER:
		( )

COMPANY:	ADDRESS:		NAME OF SUPERVISOR: May we contact?		
JOB TITLE:	DUTIES PERFC	DRMED:	FROM: MONTH/YEAR		
STARTING PAY:	REASON FOR L	LEAVING:		TO: MON PHONE NUMBER:	TH YEAR
			( )		
COMPANY:	ADDRESS:		NAME OF SUPERVISOR: May we contact?		
JOB TITLE:	DUTIES PERFC	DRMED:	FROM: MONTH/YEAR		
					TH YEAR
STARTING PAY:	REASON FOR I	LEAVING:		PHONE NUMBER:	
be provided to you in conjunction with this application. If so, are you able to perform all of the essential functions of the position applied for with or without a reasonable accommodation? NO YES	nsure /A	I certify that the information provided in this Employment Application, and any other document provided in an effort to gain employment is true, correct and complete. I also authorize investigation of all statements contained in these documents for employment, as it may be necessary, in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.	accep emplo a contin upon contin the fu SPICE Indian mean resign termin at any	erstand that tance of an offer of oyment does not create tractual obligation the employer to nue to employ me in ture. Employment at E ROOM   Neighborhood n Bistro is at-will, ing that either I may nor the employer may nate my employment v time and for any n with or without e.	I understand that no employee or representative of the employer, other than the president 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 my at-will employment status described above.
Initials:		Signature:	Signa	ture:	Signature:

I certify that all information contained in this application is truthful and accurate. I fully understand the statements I have initialed or signed above. I understand that I may be asked about job-related criminal convictions and may be required to submit to a background check as part of the interview process, or following a conditional offer of employment. I further understand that a criminal conviction is not an absolute bar to employment.

# SIGNATURE OF APPLICANT