

**Hof's Hut Restaurants, Inc.**  
**Employment Application**  
*An Equal Opportunity Employer*



PLEASE PRINT

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY #
ADDRESS	CITY	ZIP CODE	TELEPHONE #
EMERGENCY CONTACT NAME	HOME TELEPHONE	WORK TELEPHONE	

**Work Experience**

*(List most recent job first. If no work experience, list personal references.)*

May we contact your present employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

FROM	EMPLOYER'S NAME / ADDRESS / TELEPHONE	START PAY	JOB TITLE
TO		LAST PAY	REASON FOR LEAVING

DESCRIBE YOUR DUTIES AND RESPONSIBILITIES:

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DESCRIBE YOUR DUTIES AND RESPONSIBILITIES:

**Position / Availability**

For which position are you applying? \_\_\_\_\_

When are you available to start work? \_\_\_\_\_

Wage rate required \$ \_\_\_\_\_  per hour  per week – Total hours required per week \_\_\_\_\_

<b>Hours Available</b>	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

**General Information**

School: (most recently attended)

Name \_\_\_\_\_ Location \_\_\_\_\_

Last grade completed \_\_\_\_\_ Grade Average \_\_\_\_\_ Now enrolled? \_\_\_\_\_

Have you ever worked for Hof's Hut Restaurants, Inc. before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, when? \_\_\_\_\_ Location \_\_\_\_\_

To verify past employment, list any names under which you were previously employed.

Are you at least 18 years of age?  Yes  No

If not, are you able to provide a valid work permit, high school diploma or equivalent?

Yes  No

What languages do you speak, read or write fluently? \_\_\_\_\_

Do you have a reliable means of transportation?  Yes  No

Can you perform the essential functions of the position for which you are applying with or without reasonable accommodations?  Yes  No

Do you know anyone currently working for this company? \_\_\_\_\_

How did you find out about this job? \_\_\_\_\_

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?  Yes  No

Have you ever been convicted of a criminal offense (felony or misdemeanor) ? (Convictions for marijuana-related offenses that are more than two years old need not be listed.)  Yes  No

If yes, state nature of the crime(s), when and where convicted, and disposition of the case. \_\_\_\_\_

*Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.*

### Certification, Acknowledgement and Release

I certify that the information provided herein is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this application of employment form will be considered grounds for termination.

I authorize the company to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to the company any and all information they may have concerning my previous employment. In addition, I hereby release the company, my former employers, and all other persons from any and all claims, demands, or liabilities arising out of, or in any way related to, such disclosure.

I acknowledge and agree that, if employed, both the company and I have the right to terminate the employment relationship at any time with or without cause or advance notice. Hof's Hut Restaurants, Inc. retains the right to terminate or alter any employee's employment, position, duties, title or compensation at any time with or without notice, for any reason or no reason, with or without cause. This employment at will relationship will remain in effect throughout my employment with the company and may not be modified by an oral or implied agreement.

No one other than the president of Hof's Hut Restaurants, Inc. is authorized to enter into any agreement for employment for a specified period of time or to make any agreement contrary to this policy of at-will employment. Any such agreement must be in writing and signed by the president.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### **EMPLOYER USE ONLY – DO NOT WRITE IN THIS AREA**

A	1	2	3
P	1	2	3
E	1	2	3

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If applicant is a former employee, is applicant eligible for rehire?  Yes  No

(Requires corporate approval)