

Warrior Application

We appreciate your taking the time to fill out this application. It is important that all questions be answered completely and accurately. Resumes will be accepted as additional information but not in place of a completed application. Please be sure to sign the application when it is completed. Applications will be kept on file after submittal.

(DBA GENGHIS GRILL) IS AN EQUAL OPPORTUNITY EMPLOYER. It is our policy to abide by all Federal, State and local laws which prohibit discrimination against qualified applicants on account of race, color, creed, national origin, religion, age, sex, marital status, disability, sexual orientation, or any other protected classification prohibited by Federal, State or local law, if otherwise qualified.

NOTE: If you need assistance in completing this application, we will be happy to assist you.

PERSONAL INFORMATION (Please print clearly in black ink or type.) Name: E-Mail Address First Middle Last Current Address: Home: Street City State Zip Code Phone Permanent Address: Home: State Zip Code Phone Street City

Type of Position Desired:

Can you after employment submit proof of U.S. citizenship or verification documents of your legal right to work in the United States? Yes No

Are you 18 or older (of legal age to serve alcohol?) Yes No. If No, You may be required to provide authorization to work.

Are you available for full time work? Yes No Are you willing to work flexible hours, which could include weekends and/or overtime? Yes No

Date Available For Work:

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Indicate the shifts you are available to work by marking an "X" in the boxes below.

	Monday	luesday	Wednesday	Thursday	Friday	Saturday	Sunday	1
Lunch Dinner								
Desire Sala	ry Range		Do you have a re	liable means of trai	nsportation to and f	rom work?	es 🗌 No	
Were you pr	reviously employed	by GENGHIS GRIL	L? 🗌 Yes 🗌 No	o If Yes, Date(s)?_	Locatio	n?F	Position?	
Do you have	e any relatives worki	ng for GENGHIS (GRILL? Yes [No If Yes, list na	ames, relationships	, and place employ	/ed:	<u> </u>
Do you plan the hours:	to engage in other	work while in our e	mploy? 🗌 Yes 🗌	No If Yes, pleas	e list place of emplo	oyment and describ	be the work as well	as

Have you ever been convicted of a felony, pled guilty or no contest to a felony, been placed on probation for a felony offense or received deferred adjudication (Conviction will not necessarily disqualify an applicant for employment)? Yes No If Yes, explain:

Are you able to perform the essential job functions of this job with or without reasonable accommodations? Essential Job Functions: Customer Service Orientated Be a team player Be able to handle cash transactions. Be able to lift 50 lbs or less • Communicate Effectively •Suggestively Sell• Be able to walk and stand for long periods of time• Able to multitask in a fast paced environment• Be able to work with kitchen equipment. Ability to follow all State, Federal, and Corporate Policies.

Yes No If Yes, explain:

Do you now have Hepatitis A, Salmonella, Typhus, TB or any other illness that can be spread by serving or preparing food? 🗌 Yes 🗌 No If Yes, explain:

HIGH SCHOOL / G.E.D.		
School:	No. of Semester Hours Completed:	Graduated? Yes No
Location:	Type of Diploma/Degree:	Major Field of Study:
COLLEGE / UNIVERSITY / TECHNICAL / VOCATIONAL		
School:	No. of Semester Hours Completed:	Graduated? Yes No
Location:	Type of Diploma/Degree:	Major Field of Study:

Current Licenses / Registrations (Indicate Types and Dates Received):

EMPLOYMENT INFORMATION / HISTORY

Please provide your complete work history for the preceding three employers with the most recent first. Include military service, if applicable. We encourage you to attach a resume, but it may not take the place of information on this application.

EMPLOYER 1:		Type of Business:	Business Phone No:		
Mailing Address:		Immediate Supervisor's Name:	May we contact? Yes No		
Starting Date: Leaving Date:		Starting Base Salary:	Ending Base Salary:		
Starting Position Title:		Present or Last Title:	Full Time 🔄 Part Time 🗌 Seasonal		
Briefly Describe Your Duties	and Responsibilities:				
Explain Reason for Leaving:					
EMPLOYER 2:		Type of Business:	Business Phone No:		
Mailing Address:		Immediate Supervisor's Name:	May we contact? Yes No		
Starting Date:	Leaving Date:	Starting Base Salary:	Ending Base Salary:		
Starting Position Title:		Present or Last Title:	🔄 Full Time 🗌 Part Time 🗌 Seasonal		
Briefly Describe Your Duties	and Responsibilities:				
Explain Reason for Leaving:					
EMPLOYER 3:		Type of Business:	Business Phone No:		
Mailing Address:		Immediate Supervisor's Name:	May we contact? Yes No		
Starting Date:	Leaving Date:	Starting Base Salary:	Ending Base Salary:		
Starting Position Title: Presen		Present or Last Title:	Full Time 🗌 Part Time 🗌 Seasonal		
Briefly Describe Your Duties	and Responsibilities:				
Explain Reason for Leaving:					
Have you ever been fired? 🗌 Yes 🗌 No If Yes, please explain:					
Have you ever signed a non-compete agreement? Yes No If Yes, Where, and please explain the agreement?					

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

If you have any questions regarding the following statements, please ask for assistance.

I declare that I am qualified to perform all the duties of the position I am seeking, with or without a reasonable accommodation. I also declare that the information I have provided on this application is true and correct and that any false statements or omissions will justify my rejection or dismissal. I authorize Genghis Grill to (1) contact any of my previous employers as well as any reference source to verify the facts and information that I have furnished regarding my qualifications and my character; (2) obtain information from law enforcement and other governmental agencies, military authorities, and private companies concerning my conduct, including traffic and criminal convictions; (3) obtain information from educational institutions concerning my educational record, conduct, and skills; and (4) obtain information concerning my credit history from credit reporting agencies, financial institutions, and other sources.

I authorize any person(s) having knowledge to provide such information to Genghis Grill, and release from liability and agree to hold harmless any person that furnishes such information in good faith. If I am employed, I agree to abide by rules, procedures, and policies as modified from time to time, including any drug-free work place policies.

If employed by Genghis Grill, I understand that I will be an employee at will and that my employment with Genghis Grill may be terminated at anytime by Genghis Grill or myself for any reason whatsoever. I understand that no supervisor or manager may alter or amend the above conditions. Only the President of Genghis Grill has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

If I am employed, I understand that I will be asked to sign a Federal I-9 form and to provide positive proof of my identity and verification of my right to live and work in the United States. Finally, I understand that this is not only an application for employment and an offer of nor contract of employment and no part of this application shall be construed as an offer of employment or an employment contract.

Ap	plica	nt's	Sia	nature

Printed Name