



Position Seeking \_\_\_\_\_

Full-Time / Part-time  
(circle one)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**HAMBURGER MARY'S**  
An Equal Opportunity Employer

.....  
*In compliance with federal and state equal opportunity laws, it is this company's intention to consider all applicants without regard to race, color, religion, sex, sexual orientation, national origin, age, disability or any other protected classification.*

Name: \_\_\_\_\_ S S #: \_\_\_\_\_  
(last) (first) (M.I.)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ email: \_\_\_\_\_

Generally speaking, what hours are you available to work?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
DAY							
NIGHT							

Please circle "yes" or "no" and provide additional information where requested (you may use the back):

Yes / No . . . Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age)

Yes / No . . . Are you at least 21 years old?

Yes / No . . . If hired, can you present evidence of your US citizenship or proof of your legal right to work in this country?

Yes / No . . . Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If no, please describe the functions that cannot be performed:

\_\_\_\_\_  
*(Note: We comply with the ADA and applicable state law and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)*

Yes / No . . . Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? If yes, please state the nature of the crime(s), when and where committed and disposition of the case:

Yes / No . . . Have you ever worked with the Micros POS system?

Please list any special abilities or training we should consider while we evaluate your application: \_\_\_\_\_

.....  
**References.** List below three persons not related to you who have knowledge of your work performance and character:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Employment History.** List below your previous employment starting with the most recent employer (last three years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

\_\_\_\_\_  
*Name of Employer*                      (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Start: \_\_\_\_\_ End: \_\_\_\_\_  
*Phone Number*                      *Dates of Employment*

May we contact this employer for a reference? . . . Yes / No \_\_\_\_\_  
*Your Supervisor's Name*

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....

\_\_\_\_\_  
*Name of Employer*                      (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Start: \_\_\_\_\_ End: \_\_\_\_\_  
*Phone Number*                      *Dates of Employment*

May we contact this employer for a reference? . . . Yes / No \_\_\_\_\_  
*Your Supervisor's Name*

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....

\_\_\_\_\_  
*Name of Employer*                      (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Start: \_\_\_\_\_ End: \_\_\_\_\_  
*Phone Number*                      *Dates of Employment*

May we contact this employer for a reference? . . . Yes / No \_\_\_\_\_  
*Your Supervisor's Name*

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....

**Please read carefully and sign below.**

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time lapsed before discovery.

I hereby authorize Hamburger Mary's to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and further authorize the references I have listed to disclose to Hamburger Mary's any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Hamburger Mary's, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that Hamburger Mary's is an at-will employer and nothing contained in the application, or conveyed during any interview that may be granted or during my employment (if hired) is intended to create an employment contract between me and Hamburger Mary's. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, and with or without cause at the option of either myself or Hamburger Mary's, and that no promises or representations contrary to the foregoing are binding on HMCR unless made in writing and signed by an authorized officer of Hamburger Mary's.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*