DOG # SUDS . APPLICATION FOR EMPLOYMENT

VARIOUS FEDERAL, STATE AND LOCAL LAWS PROHIBIT DISCRIMINATION BASED ON RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, DISABILITY OR MARITAL STATUS. DOG 11 SUDS IS AN EQUAL OPPORTUNITY EMPLOYER AND YOUR RESPONSE TO ANY QUESTION WILL NOT BE USED AS A BASIS FOR DISCRIMINATION, BUT WILL BE JUDGED ON ITS RELEVANCE TO THE POSITION YOU ARE SEEKING.

	Sun		
Home Talephone () Position Applying For: Date Available Are you interested in (check all that apply) For including to Part-time © Temporary © Summer Available Are you willing to relocate? © Yes © No If you are under 18 years of age, please state your date of birth (No one under age 15 may ce hired) Type of School Name of Location of School Cay Mon Tues Wed Thur Fri Sat From To No	Sun		
Care	Sun		
Date Available Are you interested in (check all that apply) □ Full-time □ Part-time □ Temporary □ Summer Are you willing to relocate? □ Yes □ No □ If you are under 18 years of age, please state your date of birth	ted		
Are you willing to relocate? □ Yes □ No If you are under 18 years of age, please state your date of birth (No one under age 15 may be kired) How were you referred to DOG in SUDS? Education Type of School Name Address City State Zip □ □ Graduate Name Address School City State Zip □ □ Graduate Name Address Yes School City State Zip □ □ Graduate Name Address Yes Oracuse Zip □ □ Graduate Name Address School City State Zip □ □ Graduate Name Address School City State Zip □ □ Graduate Name Address School City State Zip □ □ Other Name Address Zip □ □			
Full-time Part-time Temporary Summer Available To			
How were you referred to DOG in SUDS? How were you referred to DOG in SUDS?			
How were you referred to DOG in SUDS?			
Type of School Name of Location of School Degree/ Area of Study Number of Years Attended Graduate (Check (C			
School Name of Cocation of School Of Study Years Attended (Check			
City State Zip C Cottege Name Address Yes City State Zip C Graduate Name Address Yes School City State Zip C Other Name Address Yes City State Zip C	Graduated (Check One)		
College	No		
City State Zip III Graduate Name Address Yes School City State Zip III Other Name Address Yes City State Zip III U.S. Military Service	а		
Graduate Name Address Yes School City State Zip 0 Other Name Address Yes City State Zip 0 J.S. Military Service Output Output Output Output	No		
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Other Name Address Yes City State Zip U.S. Military Service	0		
City State Zip U.S. Military Service	No		
J.S. Military Service	a		
	Rank Attained		
	,		
Special skills			
List Cooking Skills and Restaurant Equipment you can operate: Computer Skills / Other Equipment / Other skills:	Computer Skills / Other Equipment / Other skills:		
Legal			
Are you a U.S. Citizen □ Yes □ No. If no, do you have a legal right & necessary documents to work in the U.S.? □ Yes □ No (Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986.) Were you ever discharged by any company? □ Yes □ No. If yes, list Name of Company(ies) and Reason for discharge:			
Have you ever been convicted of a crime other than a minor traffic violation? Tyes No. If yes, please explain offense and final disposition:			
List any reason(s) you may not be able to pass a standard Employment Physical (including Drug Screening):			

Employment History List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. May we contact your present employer?

Yes
No. Past employer? Yes
No. Please indicate if you were employed under a different name. POSITION HELD LIST MAJOR SALARY OR REASON FOR DATES NAME AND ADDRESS OF EMPLOYER AND SUPERVISOR DUTIES WAGES LEAVING Name From: Your Job Title Starting Address City State To: Supervisor Phone () Final Your Job Title Starting Address City State To: Supervisor Phone (Final Your Job Title Name Starting Address City State Supervisor Phone (Final From: Your Job Title Starting Address City State To: Supervisor Phone (Final Have you previously worked for DOG n SUDS? ☐ Yes ☐ No If Yes, Complete Section Below: Position Held _____ DOG n SUDS Location _____ Supervisor's Name: Dates Employed From To Reason for Leaving ___ References Business references: (Please do not list relatives; indicate if you were known by reference under a different name) Address Work Phone # Title Years Known Name) () ()

Please Read Carefully

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history. I authorize anyone possessing this information to furnish it to DOG in SUDS and/or a 3rd party company upon request and I release anyone so authorized, DOG in SUDS and any 3rd party company from all liability and damages whatsoever in furnishing, obtaining or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in immediate dismissal. I understand, also that I am required to abide by all rules and regulations of DOG in SUDS Inc.

I understand and agree that if employed, the employment will be "at will". That is, either I or DOG in SUDS may end the employment relationship at any time, for any reason, or no reason. I understand that receipt of this application by DOG in SUDS does not imply employment and that this application and/or any other DOG in SUDS documents are not contracts of employment.

APPLICANT'S SIGNATURE	DATE SIGNED
ALL CIONITIO SIGNATURE	DATE SIGNED