KAFE NEO

Application for Employment

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

***** PLEASE PRINT CLEARLY *****

Applicant Information

First Name _____ Middle _____ Last _____

Street Address _____ Social Security No. _____

City/State/Zip _____ Phone (_____)_____

E-Mail Address:_____

If hired, do you have a reliable means of transportation to get to work? (YES) (NO)Describe _____

Are you at least 18 years old? (YES) (NO) If you are under 18 years of age, can you furnish a valid work permit? (YES) (NO)

Are you legally eligible for employment in the U.S.? (YES) (NO)
(Proof of U.S. citizenship or immigration status is required if hired.)

Have you ever been convicted of a crime? (YES) (NO)

If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

_____

Employment Information

Position(s) applying for: _____ Salary Desired _____

How did you find out about this job? ( ) Newspaper ( ) Employee ( ) Walk-in ( ) Relative ( ) Other _____

Why are you seeking a new job at this time? _____

Are you seeking full time, part time or temporary employment? _____

What hours and shift(s) would you prefer to work? _____

List times you are not available to work? _____

Are you willing to work overtime? (YES) (NO) Weekends? (YES) (NO) Holidays? (YES) (NO)

Are you currently employed? (YES) (NO) If hired, when would you be able to start? _____

Have you ever worked for this organization before? (YES) (NO) If yes, name used: _____

List any friends or relatives employed by this company: _____

Have you ever been terminated or asked to resign from any position? (YES) (NO) If yes, please explain: ___

_____

If applicable, please refer to the attached job description for the position for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? (YES) (NO)

Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: _____

Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8	Secondary: 9 10 11 12 G.E.D	College: 1 2 3 4 5 6 7 8
Name of School: _____	Name of School: _____	Name of School: _____
Location of School: _____	Location of School: _____	Location of School: _____

Other Education: _____ Degree & Major: _____

Work History (please begin with most recent)

Company _____ Phone Number: (_____) _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

Company _____ Phone Number: (_____) _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

Company _____ Phone Number: (_____) _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

May we contact the employers listed above? (YES) (NO)

If no, list the employers you do not wish us to contact and why: _____

_____

Authorizations *(please read carefully, then sign and date below)*

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification form my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.
I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company. Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter.

Signature _____ Date _____

Office Use

( ) Screen Interview Date: _____ ( ) Second Interview Date: _____ Hired Date: _____

Background Check (YES) (NO) Status: _____ Interview: _____ Perception: _____

Score: _____