



Application for Employment

We are an equal opportunity organization. We recruit, employ, train, compensate, and promote without regard to race, religion, creed, color, national origin, age, gender, sexual orientation, marital status, disability, veteran status, or any other basis protected by applicable federal, state, or local law.

Please print clearly in block letters using blue or black ink. Complete all applicable items on the application fully and accurately.

Today's Date	Position Desired	Referred By:
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Personal Data

Last Name	First Name and Middle Initial	Social Security Number
Address		
City	State	Zip Code
Home Phone	Work Phone (If OK to call)	E-mail address
		Fax#

General Information

Are you willing to travel? Yes No	Any travel restrictions? Yes No	Please describe restrictions:	Are you willing to relocate? Yes No	Describe any limitations to relocation:
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Have you ever been convicted of a crime other than a minor traffic offense or have you pled Guilty or Nolo Contendere to any Felony or Misdemeanor? **Yes** **No**
If "Yes," please describe:

*** Convictions will not necessarily disqualify an applicant for the position sought.**

Are you related to any personnel in the Organization? Yes No	Name(s) Relationship(s)
Have you ever submitted an application to the organization before? Yes No	Date(s) (mm/yyyy):
Are you legally authorized to work in the United States? Yes No	Will you now or in the future require sponsorship for employment visa status (for example, H-1B Visa status)? Yes No

Education (High School) Check box if not applicable []

School Name	School Address, City, State, Zip
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Education (Post High School) Check box if not applicable []

College/University Name	School Address, City, State, Zip			
Date Grad. (mm/yyyy)	Degree Name			
Overall GPA	Out of	Major Description	Major GPA	Out of

		2 nd Major Description	2 nd Major GPA	Out of
Education (Post High School) Check box if not applicable []				
College/University Name			School Address, City, State, Zip	
Date Grad. (mm/yyyy)			Degree Name	
Overall GPA	Out of	Major Description	Major GPA	Out of
		2 nd Major Description	2 nd Major GPA	Out of

Professional Certificates, Licenses, and Permits Check box if not applicable []

1. Description DRIVERS LICENSE			
Number	Date Expires (mm/dd/yyyy)	Status	State
2. Description			
Number	Date Expires (mm/dd/yyyy)	Status	State
3. Description			
Number	Date Expires (mm/dd/yyyy)	Status	State

Professional Association Memberships Check box if not applicable []

1. Association	
Expiration Date (mm/dd/yyyy)	
2. Association	
Expiration Date (mm/dd/yyyy)	
3. Association	
Expiration Date (mm/dd/yyyy)	

Foreign Language Skills Check box if not applicable []

1. Language Name	
Proficiency: Rudimentary Average Above Average Excellent	
Please describe your relative speaking, listening, reading, and writing skills in the language listed above:	
2. Language Name	
Proficiency: Rudimentary Average Above Average Excellent	
Please describe your relative speaking, listening, reading, and writing skills in the language listed above:	

Other Skills & Abilities (including computer skills) Check box if not applicable []

1. Skill Description	Date Obtained	How obtained, i.e. self taught, class, etc.	Proficiency:
2. Skill Description	Date Obtained	How obtained, i.e. self taught, class, etc.	Proficiency:
3. Skill Description	Date Obtained	How obtained, i.e. self taught, class, etc.	Proficiency:
4. Skill Description	Date Obtained	How obtained, i.e. self taught, class, etc.	Proficiency:

Employment History: Account for all of your time chronologically (**including** US Armed Services, self-employed, and **unemployed time**) for the past **10** years, beginning with the present date (see note on first page regarding **prior** employment with the Firm, its affiliates or related entities). Note: Applicants should not provide any information about the nature of their military discharge in the box marked "Reason for Leaving."

1. Current Employment <i>If not currently employed, skip this item and begin with item 2 below.</i>						
From (mm/dd/yyyy)	To (mm/dd/yy yy) N/A	Full time	Part time	Base Salary \$	Overtime \$	Additional Compensation \$
Current Employer				Nature of Business		
Employer's Address (Street, City, State, Zip Code)				Reason For Leaving (Not applicable to military discharge)		
Position Title/Position Responsibilities			Supervisor's Name		Supervisor's Title: Contact Number:	
2. Prior Employment <i>Check box if not applicable []</i>						
From (mm/dd/yyyy)	To (mm/dd/yy yy)	Full time	Part time	Base Salary \$	Overtime \$	Additional Compensation \$
Current Employer				Nature of Business		
Employer's Address (Street, City, State, Zip Code)				Reason For Leaving (Not applicable to military discharge)		
Position Title/Position Responsibilities			Supervisor's Name		Supervisor's Title: Contact Number:	
3. Prior Employment <i>Check box if not applicable []</i>						
From (mm/dd/yyyy)	To (mm/dd/yy yy)	Full time	Part time	Base Salary \$	Overtime \$	Additional Compensation \$
Current Employer				Nature of Business		
Employer's Address (Street, City, State, Zip Code)				Reason For Leaving (Not applicable to military discharge)		
Position Title/Position Responsibilities			Supervisor's Name		Supervisor's Title: Contact Number:	
4. Prior Employment <i>Check box if not applicable []</i>						
From (mm/dd/yyyy)	To (mm/dd/yy yy)	Full time	Part time	Base Salary \$	Overtime \$	Additional Compensation \$
Current Employer				Nature of Business		
Employer's Address (Street, City, State, Zip Code)				Reason For Leaving (Not applicable to military discharge)		
Position Title/Position Responsibilities			Supervisor's Name		Supervisor's Title: Contact Number:	

References (List up to three business or academic reference and if desired one personal references do not include relatives.)		
Name	Phone #	Relationship
1.		
2.		
3.		



IMPORTANT READ CAREFULLY BEFORE SIGNING

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements made herein and authorize the references listed above to give you any and all information concerning my previous employment, or any information they have, personal or otherwise. In connection with my application for employment with the **Craft Culinary Concepts**, I authorize the procurement of an investigative consumer report and understand that it may contain information about my background, character, general reputation, education, credit worthiness and job performance. I understand that, upon written request within a reasonable period of time, I am entitled to additional information concerning the nature and scope of this investigation. I authorize all persons, schools, companies, corporations, credit bureaus, state agencies, and criminal courts to release such information to **Craft Culinary Concepts**, as well as the background reporting agency selected by the **Craft Culinary Concepts** including any of the agency's officers, agents, employees and servants. I voluntarily waive all recourse and release them from liability for complying with this authorization. This authorization/release shall apply to this as well as any future request for an investigative/consumer report by **Craft Culinary Concepts**.

I understand that this employment application is not a contract of employment; I may voluntarily leave employment upon proper notice, and may be terminated at any time and for any reason. I understand that all oral or written statements to the contrary are hereby expressly disavowed and not be relied upon. I understand and agree that, if hired, my employment is for no definite period, unless otherwise stated in writing, and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Date _____

Signature _____



Reference: Pre-Employment Background Investigation

Dear Prospective Candidate,

As part of the hiring process, the Craft Culinary Concepts will conduct a background check. The federal Fair Credit Reporting Act provides individuals with certain rights in connection with certain background checks. Therefore, as an applicant for employment and, if hired, as an employee of the Craft Culinary Concepts, you have certain rights under the Fair Credit Reporting Act.

As part of a background check, the Craft Culinary Concepts may obtain a "consumer report" from a "consumer reporting agency," and may use such a "consumer report" for "employment purposes."

A "consumer report" is any written, oral, or other communication of any information by a "consumer reporting agency" bearing on an individual's creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing the individual's eligibility for "employment purposes". For example, a "consumer report" may include, but is not limited to, a criminal background investigation, driving records, or credit reports.

A "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative non-profit basis, regularly engages in whole or in part in the practice of assembling or evaluating consumer credit information or other information on individuals for the purpose of furnishing "consumer reports" to others, such as the Craft Culinary Concepts.

"Employment purposes," when used in connection with a "consumer report," means a report used for the purpose of evaluating an individual for employment, promotion, reassignment, or retention as an employee.

Attached you will find a pre-employment background release forms. Please complete the forms, sign and date them.

Applicants are considered and employees are treated during employment without regard to age, race, color, religion, sex, national origin, marital or veteran status, medical condition, or disability. Date of birth is required from all applicants and employees to facilitate a background check.

Thank you,

Donald R. Beckham, Jr.
Personnel Manager
Craft Culinary Concepts



**AUTHORITY AND CONSENT
TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize and direct you to release employment records, civil litigation records, and criminal conviction records upon request of the bearer. In accordance with the Family Educational Rights and Privacy Act, I also authorize and direct you to release education records, including academic, attendance, and disciplinary records, as well as any necessary personally identifiable information, upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Craft Culinary Concepts only and is for the purpose of evaluating my possible employment in the Company

I hereby release you, as custodian of such records, and your officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

I have read the foregoing release, understand it and agree to the terms and conditions therein.

Full name: _____ Date: _____
(Signature)

Full Name: _____
(Typed or Printed)

Current Address: _____ Social Security #: _____

City & State: _____ Date of Birth: _____

Telephone #: _____ Cell Phone #: _____

Drivers License # _____ State: _____

Email Address(s) _____

Alien Registration Number (if applicable) _____

All addresses at which I have resided for the past five years (if any):

First previous address: _____

City _____ State _____ Zip Code _____ Dates _____

Second previous address: _____

City _____ State _____ Zip Code _____ Dates _____

Third previous address: _____

City _____ State _____ Zip Code _____ Dates _____



BACKGROUND CHECK

ACKNOWLEDGMENT AND AUTHORIZATION

I understand that the Craft Culinary Concepts (the "Company") will conduct a background check as part of the hiring process. I understand that this process will involve obtaining "consumer reports" about me from "consumer reporting agencies." I also understand that the Company will use such reports for "employment purposes."

I hereby authorize the Company and any of its authorized employees, agents, representatives, and affiliates to procure and obtain "consumer reports" about me from a "consumer reporting agency." I also hereby authorize the Company and any of its authorized employees, agents, representatives, and affiliates to consider those "consumer reports" for "employment purposes" when making decisions about my employment with the Company.

DATED this ____ day of _____, 2018.

Printed Name

Signature



**DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORTS
AND INVESTIGATIVE CONSUMER REPORTS UNDER
THE FAIR CREDIT REPORTING ACT**

Pursuant to the Fair Credit Reporting Act, you hereby are notified that the Craft Culinary Concepts (the "Company") may obtain a consumer report and/or an investigative consumer report on you. A consumer report will provide information from a consumer-reporting agency about your credit standing, general reputation, and mode of living. An investigative consumer report is designed to provide information about your character and may include information obtained by interviews with your friends, neighbors, and associates. Such consumer reports and investigative consumer reports may be obtained by the Company.

You are entitled to request the Company to inform you whether an investigative consumer report was prepared and, if so, the name and address of its preparer. You further are entitled to request from the Company information on the scope and nature of the investigation underlying the investigative consumer report. Finally, you are entitled to request a copy of any investigative consumer report by contacting the consumer-reporting agency that prepared it. Any such requests should be directed to the Company's General Counsel.

By signing below, you hereby authorize the Company to procure a consumer report and/or investigative consumer report as disclosed above.

Full name: _____
(Signature)

Date: _____

Full Name: _____
(Typed or Printed)

California, Minnesota and Oklahoma Applicants ONLY:

_____ Please check here to have a copy of your consumer report sent directly to you.