

# THE TACO MAN

taqueria

## Employment Application

Please print clearly and answer all questions fully

### Applicant Information:

Full Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Last First M.I. MM/DD/YYYY

Address: \_\_\_\_\_  
Street Address City State Zip-code

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_@\_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Position applied for: \_\_\_\_\_ Desired salary: \_\_\_\_\_

Location:  Glendora (Feb. '19)  Montclair  Ontario  \*\*Catering\*\*

Are you under 18 years of age?  Yes  No If "yes", after hired, can you provide a work permit?  Yes  No

Schedule desired:  Weekends  Weekdays  Nights Hours/ week desired: \_\_\_\_\_

Are there any hours, shifts, or days you are not available to work?  Yes  No

If "yes", when? \_\_\_\_\_

### Employment History:

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone #: \_\_\_\_\_

May we contact for reference:  Yes  No

If "no", please explain: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip-code

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone #: \_\_\_\_\_

May we contact for reference:  Yes  No

If "no", please explain: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip-code

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

Have you ever been terminated or asked to resign from any job?  Yes  No

If "yes", please explain circumstances: \_\_\_\_\_

Are you a citizen of the United States?  Yes  No

If "no", can you furnish documentation providing the legal right to remain and work in the United States?  Yes  No

Describe any previous job duties or special training relevant to the job you are applying for: \_\_\_\_\_

### Education:

High school: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No

College: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No

Other: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No

### Please read carefully before signing!

**I certify** that the information given in this application is true and complete to the best of my knowledge and that I have not knowingly omitted any information that may impact the employment decision. I understand that the information may be verified by the Company, and I hereby authorize investigation of all statements contained in this application for employment, and I hereby release my present employer and past employers from all liability and damages whatsoever arising from the release of any and all information regarding my employment. If I am employed, in consideration of my employment, I agree to abide by all rules and policies of the Company, I also agree that the duration of the employment will not be for any specified term and may be terminated by me at will or at the will of the company, with and without cause, and with and without notice, at any time. I understand that only the owner of the Company has the authority to enter into an agreement for any specified period of time, or to make any agreement contrary to the foregoing, and then only if it is done in writing and signed by the Owner and by me.

**I understand** that false or misleading information given in my application or interview(s) may result in me not being hired, or if hired, in my discharge from employment.

**I declare** under penalty of perjury that all the foregoing is true and correct.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Applicant EEO Information

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to national origin, ancestry, citizenship, race, color, religious creed, gender, sexual orientation, military service, pregnancy, marital status, age (40 and over), physical disability, mental disability, medical condition. Various agencies of the government require employers to invite applicants to identify themselves as indicated below.

Completion of this form is **voluntary** and in no way affects the decision regarding your application for employment. This form is confidential and will be maintained separately from your application.

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**Please Print**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Position applied for: (list only one) \_\_\_\_\_

Location applied at: \_\_\_\_\_

What is your race/ ethnic origin?

- American Indian and Alaskan Native
- Asian
- Black or African American
- Hispanic or Latino
- White
- Native Hawaiian or other Pacific Islander
- Two or more races

What is your gender?

- Male
- Female