

EMPLOYMENT APPLICATION

Full Name:				
	(First)	(Middle)	(Las	t)
Address:		City	State	Zip
Phone Number:	Cell:	Email: _		
Are you legally allowed to w	ork in the United S	tates?	Can you provide proof?	
Have you ever been convicte	· •	•	If 'y	es please explain:
Please note that a YES does n Do you speak any language			what language(s)?	
What position(s) are you ap		n yes		
Please indicate if you are go	0		RT TIME ON-CALL (ci	rcle one or all that apply)
Which location(s) will you b Do you have a valid Health I	e able to work at?_ Dent_Work_Card?	Gaming/Non	-Gaming Work Card?	TAM Card?
Do you have a value fication	bepti work cara.	Ouning/1101	Gaming Work Card:	
	~.		PLOYMENT HISTORY	
	Star	t with most recent er	nployment or attach resur	ne here.
Dates of employment : From	n	To:	Position(s) Held: _	
Employer :		Address:		
Phone Number :		Supervisor:		Title:
Starting salary and Title:			Ending salary and title: _	
Reason for leaving :				
May we contact this employe	er for a reference? _			
Dates of employment : From	n	To:	Position(s) Held: _	
Employer :		Address:		
Phone Number :	§	Supervisor:		Title:
Starting salary and Title:			Ending salary and title: _	
Reason for leaving :				
May we contact this employ	er for a reference? _			
Dates of employment : From	n	To:	Position(s) Held: _	
Employer :		Address:		
Phone Number :	\$	Supervisor:		Title:
Starting salary and Title:			Ending salary and title:	
Reason for leaving :				
May we contact this employ				

I certify that my answers are true and complete to the best of my knowledge. I authorize Aloha Kitchen or its authorized agents to make investigations and inquiries of my personal employment, educational, financial, and other related matters so may be necessary for a decision on employment. I therefore release employers, schools, or individuals from all liability when responding to inquires in connection with my application. I further understand that in the event that I am employed, any false or misleading information given in my application or interview may be cause for termination.

Signature of applicant: _____

___ Date: _____

ALOHA KITCHEN IS AN EQUAL OPPORTUNITY EMPLOYER