



THE OLD SPAGHETTI FACTORY HOURLY EMPLOYMENT APPLICATION

Rev. 3/09

The Old Spaghetti Factory is an Equal Opportunity Employer. Applicants for employment will receive consideration without regard to race, color, national origin, religion, age, sex, physical or mental disability, marital status, veteran status, or any other reason protected under applicable federal, state or local law. Only provide information on this application that demonstrates your qualifications for the position you desire. If you require a reasonable accommodation to participate in the pre-employment process, please advise the Company's representative of your requested accommodation.

PERSONAL INFORMATION

Today's Date: / /

Last Name	First Name	M.I.	Email:	HOME PHONE : ()																																												
				CELL PHONE: ()																																												
Street Address	Box/Apt.	City	State	Zip	Referred by: <input type="checkbox"/> College <input type="checkbox"/> Internet <input type="checkbox"/> OSF Employee <input type="checkbox"/> Other; please specify _____																																											
Have you ever been employed by this or any other Old Spaghetti Factory restaurant and/or office? <input type="checkbox"/> Yes <input type="checkbox"/> No		If "Yes", please complete this line : Supervisor and Location: Mo. Yr. Mo. Yr. Date of Employment: / /			CHECK CURRENT AGE <input type="checkbox"/> 15 & Under <input type="checkbox"/> 16 - 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 & Over																																											
POSITION DESIRED (CHECK ONE ONLY): <input type="checkbox"/> Busser <input type="checkbox"/> Server <input type="checkbox"/> Host/Hostess <input type="checkbox"/> Bartender <input type="checkbox"/> Cocktail <input type="checkbox"/> Secretary <input type="checkbox"/> Food Prep <input type="checkbox"/> Line Person <input type="checkbox"/> Maintenance <input type="checkbox"/> Kitchen <input type="checkbox"/> Dishwasher			HOURS PREFERRED: From: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td><td>S</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> To: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>				M	T	W	T	F	S	S																																			
M	T	W	T	F	S	S																																										

QUALIFICATIONS:

Please list all education, training, or experience, which you feel relates to the position applied for that would help you to perform the work, such as schools, colleges, degrees, vocational or technical programs, or military training.

NAME	ADDRESS	DEGREE	SPECIAL ACHIEVEMENT, EXPERIENCE OR TRAINING

EMPLOYMENT (LIST MOST RECENT JOB FIRST)

COMPANY:	ADDRESS:	NAME OF SUPERVISOR: May we contact?
JOB TITLE:	DUTIES PERFORMED:	FROM: MONTH/YEAR TO: MONTH YEAR
STARTING PAY:	REASON FOR LEAVING:	PHONE NUMBER: ()

COMPANY:	ADDRESS:	NAME OF SUPERVISOR: May we contact?
JOB TITLE:	DUTIES PERFORMED:	FROM: MONTH/YEAR TO: MONTH YEAR
STARTING PAY:	REASON FOR LEAVING:	PHONE NUMBER: ()
COMPANY:	ADDRESS:	NAME OF SUPERVISOR: May we contact?
JOB TITLE:	DUTIES PERFORMED:	FROM: MONTH/YEAR TO: MONTH YEAR
STARTING PAY:	REASON FOR LEAVING:	PHONE NUMBER: ()

Have you been convicted of a felony in the past seven years, excluding misdemeanors and summary offenses, which have not been annulled, expunged, impounded, or sealed by a court?
NO ___ YES ___
 If yes, describe in full:

Initials:

A job description may be provided to you in conjunction with this application. If so, are you able to perform all of the essential functions of the position applied for with or without a reasonable accommodation?
NO ___
YES ___

Initials:

I certify that the information provided in this Employment Application, and any other document provided in an effort to gain employment is true, correct and complete. I also authorize investigation of all statements contained in these documents for employment, as it may be necessary, in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature:

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. Employment at The Old Spaghetti Factory is at-will, meaning that either I may resign or the employer may terminate my employment at any time and for any reason with or without notice.

Signature:

I understand that no employee or representative of the employer, other than the president of the company, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to my at-will employment status described above.

Signature:

I certify that all information contained in this application is truthful and accurate. I fully understand the statements I have initialed or signed above.

SIGNATURE OF APPLICANT **DATE**