

MEXICAN RESTAURANTS, INC. APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION (Complete all applicable information)

Concept applying at:

Name (Last, First, MI)						
Home Phone #		Social Security #		Drivers License #		
Street Address:			City		State	Zip
If hired, can you present evidence of your legal right to work in the United States?				Are you at least 18 years old?		
Are you currently employed?		Have you ever applied with and/or worked for any MRI concept? Casa Ole, Monterey, Tortuga, La Senorita ___yes ___no If yes, date? reason for leaving?				
Have you ever been terminated from a job? If yes, please explain.			If hired, do you have a reliable means of transportation to and from work?			
Have you ever been convicted of or pleaded guilty or nolo contendere to a criminal offense other than minor traffic violation? Explain:						

EMPLOYMENT DESIRED

Position(s) applying for:		Are you applying for: ___Full-time ___Part-time ___Temporary		Date available to start?		Wages Desired:	
Are you available to work all shifts? ___yes ___no Nights ___yes ___no Weekends ___yes ___no			Why are you applying for work at MRI?		List any friends or relatives working for MRI.		

EDUCATION, TRAINING AND EXPERIENCE

High School or GED	Address, City, State		No. of Years	Degree or Diploma	Did you Graduate? ___yes ___no
College/University	Address, City, State		No. of Years	Degree or Diploma	Did you Graduate? ___yes ___no
Vocational/Business	Address, City, State		No. of Years	Degree or Diploma	Did you Graduate? ___yes ___no
Do you have any other experience, training, qualifications or skills which you feel make you especially suited for the position? Explain:					

EMPLOYMENT HISTORY (Please list below your last 4 employers. Begin with the most recent employer.)

1) Company		Address, City, State		Phone #		From Mo/Yr		To Mo/Yr	
Supervisor's name & title:			Your job title:		Earnings: Starting:		Earnings: Ending:		
Describe duties briefly:					Reason for leaving:				
2) Company		Address, City, State		Phone #		From Mo/Yr		To Mo/Yr	
Supervisor's name & title:			Your job title:		Earnings: Starting:		Earnings: Ending:		
Describe duties briefly:					Reason for leaving:				
3) Company		Address, City, State		Phone #		From Mo/Yr		To Mo/Yr	
Supervisor's name & title:			Your job title:		Earnings: Starting:		Earnings: Ending:		
Describe duties briefly:					Reason for leaving:				
4) Company		Address, City, State		Phone #		From Mo/Yr		To Mo/Yr	
Supervisor's name & title:			Your job title:		Earnings: Starting:		Earnings: Ending:		
Describe duties briefly:					Reason for leaving:				

*May we contact the employers listed above ___yes ___no If no, tell us which one(s) you do not wish us to contact.

(over)

MEXICAN RESTAURANTS, INC.

<u>EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER</u> Mexican Restaurants, Inc. does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, veteran status or status with any other group protected by federal, state or local laws.	<u>DRUG-FREE WORKPLACE</u> Mexican Restaurants, Inc. is committed to maintaining a drug-free workplace. Applicants and employees of Mexican Restaurants, Inc. may be subjected to random drug tests that are in compliance with federal and state laws.
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AUTHORIZATION

*PLEASE READ THE FOLLOWING CAREFULLY, INITIAL EACH PARAGRAPH, THEN SIGN BELOW
PLEASE COMPLETE AND SIGN ANY SEPARATE DOCUMENTS WHICH MAY BE ATTACHED*

PERSONALLY COMPLETED FORM HONESTLY AND ACCURATELY

By my signature and initials placed below, I promise that I have personally completed this application. I declare under penalty of perjury that the information provided in this employment application (and accompanying resume, if any) 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 for my dismissal from employment if discovered at a later date. I understand that any job offer will be conditional based on the satisfactory review of my qualifications including any and all background or drug screening which may be required. _____INITIALS

AUTHORIZATION TO OBTAIN INFORMATION

I voluntarily and knowingly authorize any present or past employer; supervisor; administrator; educational institution; law enforcement agency; state, local, or federal agency; private business; military branch; personal reference; and/or other persons; to give records or information they may have concerning my criminal history, educational history, employment (including character, earnings history and reasons for termination) or any other information requested by Mexican Restaurants, Inc. to determine my eligibility for employment. _____INITIALS

RELEASE

I voluntarily waive all recourse and release any company, individual or organization from liability for complying with any request from Mexican Restaurants, Inc. or agents of Mexican Restaurants, Inc. To obtain any information from any source whatsoever relating to my application for employment. I further release Mexican Restaurants, Inc. or any individual within Mexican Restaurants, Inc. regarding the use of any information received which may have bearing on my application for employment. 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. _____INITIALS

COMPLIANCE WITH RULES

If I become employed, I agree to comply with the rules, regulations, policies and procedures of Mexican Restaurants, Inc. _____INITIALS

AGREEMENT FOR ARBITRATION

I hereby agree to submit to binding arbitration of all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by Mexican Restaurants, Inc., that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with Mexican Restaurants, Inc., whether during or after that employment, will be submitted to binding arbitration pursuant to Mexican Restaurants, Inc.'s dispute resolution policy. *(See Separate Agreement)* _____INITIALS

AT-WILL EMPLOYMENT

I understand and agree that nothing contained in this application, or conveyed during any interview which may be granted, or during my employment if hired, is intended to alter the at-will employment relationship with Mexican Restaurants, Inc. _____INITIALS

I certify that all of the information provided by me on this Application is true and accurate.

Signature: _____

Date: _____

Print Name: _____