

1830 Main St  
 Irvine, CA 92614  
 Phone: (949) 222-9910  
 Fax: (949) 222-9965



### Employment Application

Application for position as:			Expected Wage		
Name in full (print)	Last	First	Middle (Not initial only)		
Social Security Number			E-mail		
Home Address	Street				
City:	State	Zip	Home Phone	Message or Mobile phone	

**Prior place of residence (list all during past seven years):**

City	State	From	To	City	State	From	To
City	State	From	To	City	State	From	To

Can you accept a position immediately? Yes  No  If not, how soon? \_\_\_\_\_

Do you have a valid driver's license? Yes  No

State	License Number	Expiration Date
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Have you been convicted of, or pleaded no contest to a traffic violation of any kind within the last FIVE years? Yes  No

If yes, please give date and details:

List any other names (such as maiden name, aliases and nicknames) that you have used since high school.

Last Name	First name	Middle Name ( not initial only)
Last Name	First name	Middle Name ( not initial only)

Are you at least 18 years of age? Yes  No  if hired, can you furnish proof that you are at least 18 years of age? Yes  No

Education	Elementary	High School	College/University	Graduate/Professional
School Name				
Years Completed				
Diploma/Degree				
Decribe Course of Study or Major				
Describe Specialized Training, Skills, and Extra-Curricular Activities				

Record of Previous Employment

Please list names of your previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. **If self-employed, give firm name and supply business references.** (Attach extra sheets if necessary).

Name of Present or Last Employer	Employed		Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$ Hr.    Mo.    Yr. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
City, State, Zip Code	To (mo./yr.)	Final \$ Hr.    Mo.    Yr. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		Name of Last Supervisor	
Telephone (        )        -					

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Telephone (        )        -					

Have you ever been terminated from or asked to resign a job? Yes  No  If yes, explain circumstances:

Please explain fully any gaps in your employment history:

If laid off, give reason:

May we contact your current employer? Yes  No

If no, please explain:

(In answering the following questions, do not include minor traffic infractions, any convictions for which the record has been sealed or expunged, or eradicated, any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, any information regarding referrals to and participation in any pretrial diversion programs, and marijuana-related offenses that occurred over two years ago.)

Conviction record will not necessarily be a bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. Have you ever pled guilty or no contest to, or been convicted of, a misdemeanor or felony? Yes  No

If so, give details and dates of each:

Have you been arrested for any matter for which you are out on bail or on your own recognizance pending trial? Yes  No

**Character References:**

Please list persons who know you well - Not previous employers or relatives

Name	Occupation	Address Street, city and state	Telephone Number	No of years Know

Remarks and schedule availability :

I understand that the receipt of this application does not imply that I will be employed at Agora Churrascaria. The statement and information given in this application are true and complete. I authorize Agora Churrascaria to conduct a background inquiry to verify that information on this application, and other documentation that I have provided, including prior employment, consumer credit, criminal conviction, and motor vehicle history are correct. I understand that all employees of Agora Churrascaria are employees at will. Likewise, Agora Churrascaria will have the right to terminate my employment at any time with or without reason or notice, regardless of the date of payment of my wages or salary. I understand that no other company representatives have the authority to alter my at-will status without the written approval of The Agora Churrascaria Board of Directors.

**THIS APPLICATION IS NOT VALID WITHOUT A PICTURE OR PICTURE ID ATTACHED.**

**My Signature certifies that I have read and agreed with the above statement.**

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_