



## Statement of Values

Dear Applicant:

Welcome to Dimitri's International Grille . Prior to completing the application for employment, please understand that we are serious about creating a productive working environment for our staff and maintaining the highest levels of quality, service and attention for our guests.

We want you to understand that we also believe in living our values, some of which are:

- We believe that good enough isn't enough. We strive for an above average experience for our guests and staff daily.
- We believe in doing business in a professional and orderly manner.
- We believe in honesty and integrity.
- We believe that only a happy and professional staff can give the level of personal service we demand.
- We believe in the ongoing training and development of our staff and see it as a worthy investment in the future of the company.
- We believe in providing legendary service – the unique and powerful sort of personal care and attention that our guests tell stories about.
- We believe that everyone is capable of being an A+ player.

If this feels like an environment for you, please complete the application.



# - Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

**\*\* PLEASE PRINT CLEARLY \*\***

Position(s) applied for \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

How did you find out about this job?  Friend  Employee  Walk-in  Relative  Other \_\_\_\_\_

Why are you seeking a new job at this time? \_\_\_\_\_

## Applicant Information

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Street Address \_\_\_\_\_ Social Security No. \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Best time to contact AM PM

Are you at least 18 years old? \_\_\_\_\_ If you are under 18 years of age, can you furnish a work permit? \_\_\_\_\_

Are you legally eligible for employment in the U.S.? \_\_\_\_\_ (Proof of U.S. citizenship or immigration status is required if hired.)

Are you a veteran? \_\_\_\_\_ If yes, give dates of service: From \_\_\_\_\_ To \_\_\_\_\_

List any special skills or training: \_\_\_\_\_

**I UNDERSTAND THAT AN OFFER OF EMPLOYMENT AND MY CONTINUED EMPLOYMENT WITH DIMITRIS INTERNATIONAL GRILLE ARE CONTINGENT UPON SATISFACTORY PROOF OF MY AUTHORIZATION TO WORK IN THE UNITED STATES \_\_\_\_\_ INITIALS**

## Employment Information

Are you seeking full time, part time, seasonal, or temporary employment? \_\_\_\_\_

What hours and shift(s) would you prefer to work? \_\_\_\_\_

List times you are not available to work? \_\_\_\_\_

Are you willing to work overtime? \_\_\_\_\_ Weekends? \_\_\_\_\_ Holidays? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If hired, how much notice do you need to give your employer? \_\_\_\_\_

Have you ever worked for this organization before? \_\_\_\_\_ If yes, list date/year: \_\_\_\_\_

List any friends or relatives employed by this company: \_\_\_\_\_

Have you ever been discharged or asked to resign from any position? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

If applicable, please refer to the attached job description for the position for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? \_\_\_\_\_ Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: \_\_\_\_\_

### FOR WHICH POSITION(S) ARE YOU APPLYING?

Bartender  Server  Host/Hostess  Utility/dish  Prep  Cook  Busperson

### ESSENTIAL PHYSICAL JOB FUNCTION

Host/Hostess	Server	Bartender	Busser/Support	Cook
Stay on feet for 6—10 hours	Stay on feet 6—10 hours	Stay on feet for 6—10 hours	Stay on feet 6—10 hours	Stay on feet 6—10 hours
Lift 30 pounds	Lift 30 pounds	Lift 70 pounds	Lift 70 pounds	Lift 70 pounds
Operate electronic equip.	Operate electronic equip.	Operate electronic equip	Verbally communicate	Use hands 99% of time
Speak clearly	Speak Clearly	Speak clearly	Use hands 99% of time	Read and follow recipes
Hear Clearly	Hear Clearly	Hear clearly	in water	Able to hear orders
Write legibly	Write legibly	Write legibly		Able to verbally communicate
				Follow product safety procedures

## Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8	Secondary: 9 10 11 12 G.E.D	College: 1 2 3 4 5 6 7 8
Name of School: _____	Name of School: _____	Name of School: _____
Location of School: _____	Location of School: _____	Location of School: _____
If in high school, are you enrolled in a recognized co-op program? <input type="checkbox"/> Yes <input type="checkbox"/> No		Degree & Major: _____
If yes, identify program and school: _____		Minor: _____

## Work History (please begin with most recent)

1. Company \_\_\_\_\_ Phone No. with Area Code (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_  
Describe duties briefly: \_\_\_\_\_  
Specific reason for leaving: \_\_\_\_\_
2. Company \_\_\_\_\_ Phone No. with Area Code (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_  
Describe duties briefly: \_\_\_\_\_  
Specific reason for leaving: \_\_\_\_\_
3. Company \_\_\_\_\_ Phone No. with Area Code (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_  
Describe duties briefly: \_\_\_\_\_  
Specific reason for leaving: \_\_\_\_\_

May we contact the employers listed above? \_\_\_\_ If not, list the employers you do not wish us to contact and why:

\_\_\_\_\_

## Authorizations & At-Will Employment Agreement

(please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application 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 agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

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.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter.

### AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_