



650 Main St.
Rockland, ME
04841

please mail your
application to this
street address
or

scan & return in PDF form to
info@homekitchencafe.com

Your Name _____

social security # _____

current address _____

city _____ state _____

e-mail _____

phone number _____

Today's Date _____

Position (s) you are applying for _____

Do you want Full Time or Part Time _____

Desired Wage? _____ Date you can start? _____

Referred By? _____

List the last 3 places you were employed starting with most recent

1. Position _____

Employer _____ date of employment _____

address _____

duties _____

name & phone of owner or person you reported to _____

Full or Part Time? _____ Pay rate? _____ Reason for leaving _____

2. Position _____

Employer _____ date of employment _____

address _____

duties _____

name & phone of owner or person you reported to _____

Full or Part Time? _____ Pay rate? _____ Reason for leaving _____

3. Position _____

Employer _____ date of employment _____

address _____

duties _____

name & phone of owner or person you reported to _____

Full or Part Time? _____ Pay rate? _____ Reason for leaving _____

Education

Last grade completed? _____

Name of College /area of study, Culinary School or other Special education? Please include dates attended.

Getting to know you

Please answer the questions below to the best of your ability. There are no wrong answers.

1. Please tell us some of the things you enjoy doing in your spare time.

2. What style of food do you most enjoy eating?

3.. If you had the opportunity to learn one of the following, which would it be and tell us why?
Please circle your choice.

- a. sky diving b. emergency medical care c. computer repair d. name your own & tell us why

Thank you for applying to Home Kitchen Cafe

Authorization

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application are grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representatives 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 the foregoing, unless it is in writing and signed by the authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws. I understand that a consumer credit report, or criminal records check may be necessary prior to my employment. If such reports are required, I understand that in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment.

In compliance with federal law, all persons hired will be required to verify identity and eligiility to work in the United States and to complete the required employment eligiibility verification document form upon hire.

Date _____

Signature _____