



We are a dine-in and delivery company dedicated to quality food and service.
Our business started in Boise in 1982.

APPLICATION FOR EMPLOYMENT

(Please print. Each item must be completed.)

I. PERSONAL INFORMATION

Today's Date: _____

Name Last First Middle

Present Address

Permanent Address (if different than above)

Social Security Number Telephone

Federal Law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) during office orientation. Failure to submit such proof within the required time shall result in immediate employment termination.

Do you have such documentation? Yes No

Position Applying For: Waitperson Driver Kitchen Management Other

1. If applying for waitperson position, are you over 19 years of age? Yes No

If applying for driver position, are you over 21 years of age? Yes No

2. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify:

3. Have you ever been convicted of a felony or plead guilty to a felony charge? Yes No
Please explain:

4. How were you referred to The Chicago Connection?

An employee. Relationship to you: _____

An advertisement: _____ Other: _____

5. Have you ever applied to or worked for The Chicago Connection before?

Yes, When: _____ No

6. Do you have special qualifications, restaurant or management experience?

II. EDUCATIONAL HISTORY

	School Name/Location	Years Completed	Degree/Diploma
High School	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

III. EMPLOYMENT RECORD *Please include all employment for the last 3 years, starting with most recent.*

1. _____
Company Name (current/most recent employer) Position Held

Address From To

Manager/Supervisor Telephone Starting/Final Wage

Nature of Work & Responsibilities

Reason for Leaving

CONTINUED ON OTHER SIDE

III. EMPLOYMENT RECORD (Continued)

2. _____
 Company Name Position Held

Address From To

Manager/Supervisor Telephone Starting/Final Wage

Nature of Work & Responsibilities

Reason for Leaving

IV. REFERENCES *Please do not include relatives.*

1. _____
 Name Occupation Relationship Years Known

Address Telephone

2. _____
 Name Occupation Relationship Years Known

Address Telephone

3. _____
 Name Occupation Relationship Years Known

Address Telephone

V. WORK AVAILABILITY

1. If your application receives favorable consideration, when will you be available to begin work? _____

2. Do you have any objection to working overtime? Yes No Can you work overtime without prior notice? Yes No

3. Do you have any schedule restrictions? Yes No If yes, what are they? _____

4. Are you interested in Part time Full time Are you interested in days nights either

5. Approximately how many hours per week are you interested in working? _____

6. Are there any scheduled events in the future for which you need time off? Yes No When? _____

7. What term of employment are you seeking? Summer only School year only Christmas season Year round

DELIVERY DRIVERS ONLY *Driver position will require a copy of Driving Record from Department of Transportation)*

1. Have you had any tickets or violations in the last 3 years? Yes No Has your license ever been suspended? Yes No

2. Have you had any vehicle accidents in the last 3 years? Yes No Have you ever been cancelled by an insurance company? Yes No

3. Do you have any night vision impairment? Yes No Are you over 21? (Insurance company requirement) Yes No

4. Can you drive a stick shift? Yes No

PLEASE READ CAREFULLY BEFORE SIGNING EMPLOYMENT APPLICATION

I authorize investigation of all information provided on my employment application or which may be deemed relevant to my consideration for employment. The scope of the investigation may include dates of employment, information regarding education, periods of unemployment, job progression, salary, attendance, performance, reason for leaving, rehire eligibility, and police and credit records. I understand an investigative consumer report including information as to my character, general reputation, and my personal characteristics may be made. I authorize all previous employers or other persons having information concerning me to provide such information, and I release from claims or liabilities all persons requesting or providing such information. I certify that the information in this application is correct to the best of my knowledge, and I understand that misrepresentation or omission of facts called for herein may result in cancellation of consideration of employment, or dismissal if I have been employed. I understand that any offer of employment is contingent upon satisfactory references, successful passage of any required pre-employment drug screening, employment and credit verifications, clearance for criminal record, and proper identification and employment eligibility as required by the Immigration Reform and Control Act of 1986 (IRCA). I agree, if requested, to submit to a physical examination or inquiry, at the employer's expense, by a doctor designated or approved by the employer, after a conditional offer of employment has been made and at subsequent intervals as the employer may direct, it being understood that such medical examinations are to determine my ability to safely and satisfactorily perform the essential functions of the position for which I am being considered or at which I am working. I understand and agree that if employed, the employment will be "at will." That is, either I or The Chicago Connection, L.L.C. may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by The Chicago Connection, L.L.C. does not imply employment and that this application and/or any other documents issued by The Chicago Connection, L.L.C. are not contracts of employment. I also understand that only the General Manager or a Managing Member of The Chicago Connection, L.L.C. has authority to enter into an agreement of employment either for a specified period of time or limiting the reasons for termination of the employment relationship and that to be effective any such agreement must be in writing and signed by both me and the General Manager or a Managing Member of The Chicago Connection, L.L.C.

Signed _____ Date _____