



LOUISIANA KITCHEN
 Application for Employment
 AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION:

DATE: _____

NAME: _____ SOCIAL SECURITY NUMBER: _____
 LAST FIRST MIDDLE

PRESENT ADDRESS: _____ HOW LONG AT CURRENT ADDRESS? YRS. MOS. _____

PERMANENT ADDRESS: _____

PHONE NUMBER: _____ ARE YOU 18 YEARS OR OLDER? _____

ARE YOU PREVENTED FROM BECOMING LAWFULLY EMPLOYED
 IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? _____ ARE YOU 21 YEARS OR OLDER? _____

EMPLOYMENT DESIRED:

POSITION: _____ DATE YOU CAN START: _____ SALARY DESIRED: _____
*SALARY DESIRED DOES NOT NECESSARILY REFLECT SALARY RECEIVED

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR CURRENT EMPLOYER? _____

EVER APPLIED TO THIS COMPANY (BOUDREAUX'S OR CABO FISH TACO) BEFORE? _____ WHERE? _____ WHEN? _____

HOW DID YOU HEAR OF US? _____

EDUCATION	Name and location of school	Number of years attended	Did you graduate?	Subjects studied
High School				
College				
Trade, Business, or Correspondence School				

GENERAL:

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK: _____

SPECIAL SKILLS: _____

ACTIVITIES (CIVIC, ATHLETIC, ETC.): _____
EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ITS MEMBERS.

J.S. MILITARY OR NAVAL SERVICE: _____ RANK: _____ PRESENT MEMBERSHIP IN THE NATIONAL GUARD OR RESERVES: _____

(CONTINUED ON OTHER SIDE)

DATE (MONTH & YEAR)	NAME & ADDRESS OF EMPLOYER, DIRECT SUPERVISOR, & PHONE NUMBER	SALARY	POSITION	REASON FOR LEAVING
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE ABOUT THIS JOB?

PLEASE INDICATE ANY AND ALL HOURS YOU ARE AVAILABLE TO WORK.
SCHEDULE PREFERENCES WILL BE ADDRESSED AT A LATER DATE.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

WOULD YOU LIKE TO WORK FULL OR PART TIME?

HOW MANY SHIFTS PER WEEK WOULD YOU LIKE TO WORK?

HOW MANY HOURS PER WEEK WOULD YOU LIKE TO WORK?

IN CASE OF EMERGENCY, NOTIFY:

NAME PHONE NUMBER ADDRESS RELATIONSHIP

LOCAL CONTACT:

NAME PHONE NUMBER ADDRESS RELATIONSHIP

"I CERTIFY THAT ALL INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION MAY BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE: SIGNATURE:

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY:

INTERVIEW DATE:

NEATNESS/PUNCTUALITY:

HIRED: YES NO POSITION:

DATE REPORTING TO WORK:

SALARY/WAGE: