JOB APPLICATION

The Industry 750 Adams Street, Boston, Massachusetts 02122 6172979010

The Industry is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Applicant Information Applicant Name:			
Address:			
City, State and Zip Code:			
Telephone Number:			
Email Address:			
Date of Application:			
Employment Position Position(s) applying for:			
How did you hear about this	position?		
What days are you available	e for work?		
What hours or shift are you	available for work?		
If needed, are you available	to work overtime?		
On what date can you start v	working if you are hired?		
Do you have reliable transpo	ortation to and from work?		
Personal Information			
Do you have any friends, rel	atives, or acquaintances working for The Industry	Yes	No
If yes, state name & relation	ship:		
Are you 18 years of age or o	older?	Yes	No
, ,			No
Are you a U.S. citizen or approved to work in the United States?			INO
wnat document can you pro	vide as proof of citizenship or legal status?		
Have you ever been convicte	ed of a criminal offense (felony or misdemeanor)?	 Yes	No

If yes, please state the na	ature of the crime(s), when and	where convicted and	disposition of the case:
<u>-</u>			
Job Skills/Qualification Please list below the skills	ns and qualifications you posses	s for the position for wh	nich you are applying:
			_
may be necessary for elig	lies with the ADA and considers ible applicants/employees to pe		
High School Name	Location (City, State)	Year Graduated	Degree Earned
Ivaille	Location (Oity, State)	Teal Graduated	Degree Lamed
College/University	L		
Name	Location (City, State)	Year Graduated	Degree Earned
Vocational School/Speci	ialized Training		
Name	Location (City, State)	Year Graduated	Degree Earned
-			_
Military:			
Are you a member of the	Armed Services?		
What branch of the milita			
What was your military ra	· ·		_
How many years did you	serve in the military?		
What military skills do vo	u possess that would be an ass	set for this position?	
Previous Employment			
Employer Name:			
Job Title:			
Supervisor Name:			
Employer Address:			

City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name: Job Title:	
Supervisor Name:	
Employer Address: City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title: Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
References Please provide 3 personal and profes	_
Reference	Contact Information
Additional Information: What does a team player mean to y	u?
Why would you make a good addition	n to the team?
Why did you get into the restaurant	ndustry?

AT-WILL EMPLOYMENT
The relationship between you and the The Industry is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the The Industry. No representative of The Industry has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.

Dated:

What do you do when you're not working. What are your hobbies?

Applicant Signature: