

POPLAR CREEK GRILL, LLC

EMPLOYEE APPLICATION

<hr/>
Name of Applicant
<hr/>
Date of Application
<hr/>
Management Reviewer
<hr/>
Position / Starting Pay
<hr/>

**PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE
ON PAGES 6, 7, 9 & 10**

**Poplar Creek Grill, LLC
San Mateo, CA**

**APPLICATION FOR EMPLOYMENT
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

PLEASE COMPLETE PAGES 2-5. SIGN PAGES 6 & 7.

DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone (____) _____

If under 18, please list age _____

Position applied for: 1) _____ Days/hours available to work
2) _____ No Pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

Date available for work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
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High School

College

Bus. or Trade School

DO YOU HAVE A DRIVER'S LICENSE? Yes No

Driver's license number _____ State of issue _____ Operator Commercial (CDL) Chauffeur

Expiration date _____

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Poplar Creek Grill, LLC
San Mateo, CA

APPLICATION FOR EMPLOYMENT

HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING TRAFFIC VIOLATIONS? Yes No

If YES, Please Describe in Full Detail _____

HAVE YOU EVER BEEN ARRESTED BUT THE CASE IS PENDING/UNRESOLVED? Yes No

If YES, Please Describe in Full Detail _____

Note: Conviction of a crime is not an automatic bar to employment – all circumstances will be considered.

An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to any inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.

It is unlawful in California to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liabilities.

Please list two references other than relatives or previous employers.

Name _____ Name _____

Position _____ Position _____

Company _____ Company _____

Address _____ Address _____

Telephone () _____ Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

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**Poplar Creek Grill, LLC
San Mateo, CA**

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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		From To	Start Final
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PLEASE PRINT ALL

Poplar Creek Grill, LLC

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San Mateo, CA

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Address _____	Address _____
_____	_____
Telephone () _____	Telephone () _____

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May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

PLEASE READ CAREFULLY – THIS IS VERY IMPORTANT !

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Poplar Creek Grill, LLC (hereinafter called "Poplar Creek Grill"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Poplar Creek Grill practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Poplar Creek Grill, LLC, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President / Managing Member of Poplar Creek Grill. Both the undersigned and Poplar Creek Grill may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Poplar Creek Grill may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Poplar Creek Grill permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release Poplar Creek Grill from any liability as a result of such contract.

I also understand that (1) Poplar Creek Grill has a drug and alcohol policy that may provide for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy implementation. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, Poplar Creek Grill may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, Poplar Creek Grill, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with Poplar Creek Grill shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with Poplar Creek Grill is terminable at will for any reason by either party.

Signature of applicant _____ **Date:** _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for your interest in Poplar Creek Grill.

IMPORTANT NOTICE

A copy of Poplar Creek Grill's Restaurant Employee Manual is available for you to review either at home or at the workplace. Please see the general manager or Director of Operations to obtain a copy. Several copies are stored in the restaurant's office. The Employee Manual has many important policies and benefits outlined and we urge you to review the latest version.

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POST EMPLOYMENT INFORMATION FORM

TO BE COMPLETED AFTER EMPLOYEE HAS BEEN HIRED

Height _____ ft. _____ in. Weight _____ Birth date _____

Married Yes No If married, how long? _____ Single Separated Divorced Widowed

Full name of spouse _____ Occupation _____

Name of company _____ Telephone (____) _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

Name _____ Telephone (____) _____

Address _____ Relationship _____

FOR INSURANCE PURPOSES ONLY: LIST ALL DEPENDENTS

NAME	RELATIONSHIP	BIRTH DATE	SSN

TO BE COMPLETED
BY EMPLOYER

Date of employment _____ Job title _____ Dept. _____

Location _____ Rate of pay _____ Full-time Part-time Salaried

Applicant's signature acknowledging above information _____

Drug test confirmation number _____

Name of person verifying information _____

Name of person authorizing employment _____