

ame (Last)	(First)		(Middle)								
ersonal Phone	Business Phone	May we c □Yes □N	-	u at work?	Ema	il Address					
Address		City			City			State		Zip	
osition Applying F		Availability: complete if	Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Date Available// Mark all that you are interested in :		applying for restaurant	From								
□Full-time □ Part-time □ Temporary □ Summer		position	То								
Are you willing to relocate? □ Yes □ No		If you are under 18 years of age, state your date of birth// (No one under age 16 may be hired)			our	Are you willing to travel? □ Yes □ No What percent?%					
w were you rele	rred to Aladdin's?										
UCATION	T						. 1	W 537			
Гуре of School	Name Name	e and Location of Sch Address	nd Location of School			Degree/Area of Study		# of Years Attended		Graduated? (Check One	
High School	City	State	Zip						□ Yes □ No		
College	Name	Address								□ Yes □ No	
	City	State	Zip						□ Ye		
Graduate School	Name	Address							_ V-	- N-	
	City	State	Zip						□ Ye	□ Yes □ No	
Other	Name	Address								o – No	
Other	City	State	Zip						u re	□ Yes □ No	
S. MILITARY	SERVICE	T				1					
Branch of Service		Technic	Technical Specialization			Rank Attained					
GAL	zen? □ Yes □ No In do, do you	have the least right	and nesses	2011 doo:	aonto to :	work in the	1100-	Voc No			
dentity and emplo	oyment eligibility of all new hire charged by any company? □ Y	s will be verified as re	equired by	the Immig	ration Re						
	ue.										

	ENT HISTORY				
List employn vour activitie	nent starting with your most recent p s. May we contact your present emp	osition. Account for any time lover? □ Yes □ No Past emp	during this period the	nat you were unemployed Please indicate if you were	by stating the nature of employed under a
, different nan	ne.	,	,	,	, ,
Dates	Name and Address of Employer	Position Held and Supervisor	List Major Duties	Salary or Wages	Reason For Leaving
From /	Name	Your Job Title		Starting	
mo. yr.	Address	Supervisor Name		Final	
To /					
mo. yr.	Phone				
From	Name Address	Your Job Title		Starting	
mo. yr.	Phone	Supervisor Name		Final	
То		Supervisor Marile		Filial	
mo. yr.					
From		Your Job Title		Starting	
mo. yr.		Supervisor Nemo		Final	
То		Supervisor Name		Final	
mo. yr.					
From		Your Job Title		Starting	
mo. yr.		Supervisor Name		Final	
To /		Capervicor Hame		T ma	
mo. yr.					
REFEREN	)				
	erences only. Please do not list relat	ives. Please indicate if you v	vere employed unde	r a different name.	
Name	Address	Work Phone #	Work Phone # Title		# Of Years Known

## Please Read Carefully:

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history. I authorize anyone possessing this information to furnish it to Aladdin's and/or a 3rd party company upon request and I release anyone so authorized, Aladdin's, and any 3rd party company from all liability and damages whatsoever in furnishing, obtaining or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of Aladdin's Eatery, Inc.

I understand and agree that if employed, the employment will be "at will". That is, either I or Aladdin's may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by Aladdin's does not imply employment and that this application and/or any other Aladdin's documents are not contracts of employment.

Applicant Signature:	Date Signed:	1	1