An equal opportunity employer Application for Employment									
First Name				Middle Initia	al Las	t Name			
Permanent Address									
	# (								
Are you 1	Are you 18 years of age or older?								
How man	How many hours per week would you like to work? Minimum hours: Maximum hours:								
Are you a	ble to work flexible l	hours includin	g nights and	d weekends	? □Yes □	No			
Are you a	ble to work holidays	(we're closed	l on Thanks	giving and C	hristmas Day	/)? □Yes	□No		
Please complete this chart to show us your availability. If there are days you can't work, place an "X" in the boxes.									
		Mon	Tues	Wed	Thur	Fri	Sat	Sun	
	Start Time	Wion	rues	VVCu	inai	•••	Jut	Jun	
	End Time								
If you are a student, please list all of your school activities, including sports, clubs, and other activities:									
How did you hear of this job?									
List names of people you know who work at Tuckers (if any):									
By what means of transportation do you plan to get to and from work?									
Have you ever worked at either Tuckers restaurant in the past? ☐Yes ☐No If yes, when?									
Do you plan to have more than one job?									
If hired, how long do you intend to work for Tuckers?									
Are you legally eligible to work in the United States?□Yes □No									
Have you ever been convicted of or plead guilty to a crime excluding traffic violations?									
If "Yes," please describe in full:									
We do not permit our employees to smoke on Tuckers premises. Are you willing to comply? □Yes □No									
We may determine that any or all tattoos need to be covered while working. Are you able to comply?								□Yes □No	
Our policy is that piercings may appear only in the ear lobes while working. Are you able to comply?								. □Yes □No	
The Secr	The Secretary of Health & Human Services has determined that certain diseases such as hepatitis A, salmonella, shi-								
	gella, staphylococcus, streptococcus, giardia, and campylobacter may prevent you from serving food or handling equipment in a sanitary manner. An essential function of this job involves handling food and utensils in a sanitary and								
	healthy fashion. Is there any reason why you cannot perform the essential functions of this job?								
If "Yes," explain in full:									

School Most Recently Attended								
Name	City	State						
Teachers or Counselor								
What is the last grade you completed?								
List your three most recent jobs (If not a	pplicable, list U.S. Military, volun	teer work performed, or personal references)						
Company	Address							
City	State	Phone						
Your job	Supervisor							
Dates worked: Fromto_	Pay r	ate						
Reason for leaving:								
Company	Address							
City								
Your jobSupervisor Dates worked: FromtoPay rate								
Reason for leaving:								
<u> </u>								
Company	Address							
City	State	Phone						
Your job	Supervisor							
Dates worked: Fromto	Pay r	ate						
Reason for leaving:								
I understand that a drug screen may be required during the probationary period of 90 days. I certify that the information on this application is true, correct, and complete and understand that any omission or erroneous information is grounds for dismissal in accordance with Tuckers policy. I authorize Tuckers to investigate all information on this application and I authorize all references listed to								
provide any and all information concerning my previous employment, and any other pertinent information that they may have, per-								
sonal or otherwise, and I release all parties from all liability for any damage that may result from furnishing this information to Tuck-								
ers. I acknowledge that Tuckers reserves the right to amend or modify any of its employment practices at any time without prior notice. I acknowledge that these policies do not create any promises or contractual obligations between Tuckers and its employees. At								
Tuckers, my employment is at will. That means that I am free to terminate my employment at any time, for any reason with or with-								
out cause, and Tuckers retains the same rights.								
Signature of Applicant		Date						