



An EEO Employer

# Application for Employment

*Please complete entire application to ensure processing*

|  |         |                |  |        |                     |        |
|--|---------|----------------|--|--------|---------------------|--------|
| Name: (Please Print)<br>Last                      First                      Middle  |         |                | What position are you applying for?  | Date:  |                     |        |
| Address:   |         |                | City, State  | Zip    |                     |        |
| Home #   |         |                | Cell #   |        |                     |        |
| E-mail Address:  |         |                | Social Security #:   |        |                     |        |
| Are you less than 18 years of Age? <input type="checkbox"/> YES <input type="checkbox"/> NO  |         |                | Can you work full time? <input type="checkbox"/> YES <input type="checkbox"/> NO |        |                     |        |
| <b>SPECIFY HOURS AVAILABLE FOR EACH DAY OF THE WEEK:</b>   |         |                |  |        |                     |        |
| MONDAY   | TUESDAY | WEDNESDAY      | THURSDAY   | FRIDAY | SATURDAY            | SUNDAY |
| Please list below the 3 places in which you have worked most recently:   |         |                |  |        |                     |        |
| 1. (Name)  |         | (City & Phone) | (Positions(s) held / wage)   |        | (Dates)             |        |
| 2. (Name)  |         | (City & Phone) | (Positions(s) held / wage)   |        | (Dates)             |        |
| 3. (Name)  |         | (City & Phone) | (Positions(s) held / wage)   |        | (Dates)             |        |
| Please list below 2 personal and / or professional references  |         |                |  |        |                     |        |
| 1. (Name)  |         | (Phone #)      | (Relationship)   |        | (Years acquainted?) |        |
| 2. (Name)  |         | (Phone #)      | (Relationship)   |        | (Years acquainted?) |        |
| Which restaurants or personal life experience taught you the most about great service and great food? Why?                           |         |                |  |        |                     |        |
| Which restaurant would you be proudest to run? Why?  |         |                |  |        |                     |        |
| Which restaurant or personal life experience contributed most to your culinary foundation? Why?                                      |         |                |  |        |                     |        |
| Describe a specific situation where you have provided excellent customer service in your most recent position. Why was it effective? |         |                |  |        |                     |        |
| What do you like most about food? What is your favorite item to order when dining out?   |         |                |  |        |                     |        |

What do you like the most about the restaurant business?

How will your next job have to be different from your last/present job to make it more challenging and interesting to you?

Why would you like to work for Big Bad Breakfast?

Have you ever visited Big Bad Breakfast?  Yes  No  
Where? \_\_\_\_\_ Describe your experience:

Name your 2 all time favorite restaurant dining experiences:  
1)  
2)

Where do you see your restaurant career in the next 5 – 10 years?  
  
What are your goals?

What activities or hobbies do you pursue outside of the restaurant business?

How has your sense of humor been valuable to you in the restaurant business?

What specific skills and attributes do you bring that make you an ideal fit for Big Bad Breakfast?

To help us get to know you better, please rank yourself on a scale of 1-10 in the following areas.  
(1 is the lowest & 10 is the highest)

|   |                                      |  |   |   |
|---|--------------------------------------|--|---|---|
| <input type="checkbox"/> Friendliness     | <input type="checkbox"/> Honesty     | <input type="checkbox"/> Following Systems | <input type="checkbox"/> Food Knowledge | <input type="checkbox"/> Reading/Writing  |
| <input type="checkbox"/> Team Player      | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Following Recipes | <input type="checkbox"/> Beer Knowledge | <input type="checkbox"/> Computer Skills  |
| <input type="checkbox"/> Physical Stamina | <input type="checkbox"/> Politeness  | <input type="checkbox"/> Cleanliness       | <input type="checkbox"/> Wine Knowledge | <input type="checkbox"/> Phone Experience |

It is the policy of Big Bad Breakfast to grant equal employment opportunity to all qualified persons regardless of race, color, religion, creed, sex (includes pregnancy or related medical conditions), sexual orientation, national origin, age, disability, citizenship status, veteran status, service in the United States Armed Forces or other protected classes as required by state and federal law.

I hereby authorize Big Bad Breakfast to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment.

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by Big Bad Breakfast to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including termination. I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Big Bad Breakfast to hire me.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PLEASE PRINT NAME: \_\_\_\_\_