

APPLICATION FOR EMPLOYMENT

Braum's is an Equal Opportunity Employer. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classification.

						(PLEASE P	RINT & USE BLU	IE OR BLACK INK	
IF UNDER 18, PLEA (mm/dd/yy)	ASE INDICATE BIRTHDATE	CAN YOU U	JPON EMPLOYM	ENT, PROVIDE VERIF	ICATION OF	YOUR LEGAL	RIGHT TO WORK IN	THE U.S.?	
NAME FIRST		MIDDLE		LAST					
PRESENT ADDRESS				CITY			STATE ZIP COI	DE	
HOW LONG HAVE YOU LIVE	ED AT THIS ADDRESS?	OME TELEPHONE NUMBER	{	CELL NUMBER			E MAIL ADDRESS		
WHO OR WHAT REFERRED YOU TO BRAUM'S?			HAVE YOU APP	HAVE YOU APPLIED WITH BRAUM'S BEFORE?					
LIST ANY FRIENDS OR RELATIVES WORKING FOR BRAUM'S			HAVE YOU WORKED FOR BRAUM'S BEFORE? ☐ YES ☐ NO If YES, where? when?						
PART-TIME □	FULL-TIME WH	HAT POSITION ARE YOU APP	PLYING FOR?						
AVAILABILITY: ANY HOURS, ANY DAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	F	RIDAY	SATURDAY	SUNDAY	
OR WRITE THE HOURS YOU AI AVAILABLE TO WORK EACH IN THE SPACES TO THE RIG	H DAY								
	PERFORM THE FOLLOWING W	I I I I I I I I I I I I I I I I I I I	OMMODATION?						
		☐ YES ☐ NO ☐ YES ☐ NO		LIFTING OVER 50 PO	OUNDS FREQ KING IN COLD		☐ YES ☐ NO ☐ YES ☐ NO		
DO YOU HAVE ANY TATTO	OS THAT ARE VISIBLE WHEN	WEARING A SHORT SLEEVE	/ED SHIRT?	☐ YES ☐ NO					
DO YOU HAVE A VALID DRI		state:		LICENSE I	NUMBER:				
IF HIRED, WHEN COULD YO	OU START WORK?								
A FELONY OR C	R RECEIVED A DEFERRED RIME OF IMMORAL COND NO If YES, please explain does not necessarily bar employr	DUCT?	CONVICTED OF	EM AB SU	MPLOYMENT Y BUSE TEST AN JBMIT TO THE	YOU MAY BE RE ND A PHYSICAL I	WORKPLACE. AS A EQUIRED TO SUBMIT TO EXAMINATION. DO YO	O A SUBSTANCE	
TYPE OF SCHOOL	1	NAME AND LOCATION		GRAD YES	NO NO	GRADE POINT AVERAGE		OF DEGREE	
HIGH SCHOOL									
2-YEAR COLLEGE OR TECH									
4-YEAR COLLEGE OR UNIVERSITY									
OTHER EDUCATION									

WORK HISTORY

EVEN IF YOU PROVIDE A RESUME, PLEASE INDICATE YOUR WORK HISTORY. START WITH YOUR CURRENT OR MOST RECENT EMPLOYER.

>	PLEASE	EXPLAIN ANY GAPS IN EMPL	OYMENT						
DATES		EMPLOYER INFORMATION				POSITION HELD & MAJOR RESPONSIBILITES	SALARY OR WAGES	REASON FOR LEAVING	
FROM		NAME					START	LEXTING	
/	yr	ADDRESS	CITY	STATE			\$		
то		PHONE					FINAL		
/	yr	SUPERVISOR'S NAME					\$		
>	PLEASE	EXPLAIN ANY GAPS IN EMPL	OYMENT						
DAT	ΓES	EMPLOYER INFORMATION			POSITION HELD & MAJOR SALARY REASON				
FROM		NAME				RESPONSIBILITES	OR WAGES	LEAVING	
/	—yr	ADDRESS	CITY	STATE			START \$		
ТО	•	PHONE							
/		SUPERVISOR'S NAME					FINAL \$		
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>	PLEASE	EXPLAIN ANY GAPS IN EMPL	OYMENT						
DAT	TES	EM	PLOYER INFORMATION			POSITION HELD & MAJOR RESPONSIBILITES	SALARY OR WAGES	REASON FOR LEAVING	
FROM		NAME					START		
mo /	yr	ADDRESS	CITY	STATE			\$		
ТО		PHONE					FINAL		
/	yr	SUPERVISOR'S NAME					\$		
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FROM		NAME					START		
mo /	yr	ADDRESS	CITY	STATE			\$		
ТО		PHONE					FINAL		
/	yr	SUPERVISOR'S NAME					\$		
>		CONTACT THE		HICH ONE(S) DO			<u>'</u>		
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		NAME OCCUPATION		ILLATIVES AND O	ND OVER THE AGE OF 21 WHOM HAVE KNOWN YOU FOR 5 YEA ADDRESS OR E MAIL ADDRESS			TELEPHONE NUMBER	
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7	acutif-	namelty of discourse 1 d or 12		D CAREFULI			a ammlayred best of the		
and a	are made in	good faith. Falsification of an	y information will result in it	mmediate dischar	ge. I further	ation given by me pursuant to becoming certify that I understand that as part of t	he procedure in process	ng this application	
as fa	mily meml		employers, financial source	s, friends, neighbo		ry and credit check, as well as a persona s with whom I am acquainted. This inqu			

I understand and agree that if hired, I will be an "at will" employee. That is, either I or Braum's may end my employment at anytime, with or without reason. I understand that completing this document or any other document does not imply an employment contract with Braum's.

I understand that the employee Polygraph Protection Act of 1988 permits polygraph testing of employees who are reasonable	ly suspected of involvement in a workplace incident, such as
theft or embezzlement, that resulted in economic loss to the employer.	

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SIGNATURE	DATE	07/10	F-11
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