

APPLICATION FOR AT-WILL EMPLOYMENT

THE JUNCTION RESTAURANT, JUNCTION INN AND JUNCTION CONVENIENCE STORE ARE AN AT-WILL EMPLOYER, MEANING THAT EITHER THE EMPLOYER OR EMPLOYEE CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.

Position Applied For: _____ Date of Application: _____

Date You Can Start: _____ *Please note that this application will only remain active for six months, after which the applicant will need to reapply.*

Name: _____ Social Security #: _____
Last First Middle

Present Address: _____
Street City State Zip

Telephone #: Home (_____) _____ Work (_____) _____

Cell Phone # (_____) _____

Are you 18 years or older? Yes No Date of Birth _____

Are there any hours or days of the week you cannot work? Yes No

If so, when? _____

Salary Desired _____

Type of Employment: Full-time Part-time

Are you employed now? Yes No

May we contact your present employer? Yes No

Did you ever apply to this Company before? Yes No Where? _____

Under what name? _____ When? _____

What Position? _____

EMPLOYMENT HISTORY: Start with your present or most recent job. Include any job-related military service assignments, self-employment, summer and part-time jobs.

| | | | |
|---------------------|---------------------------|-----------------|-----------------------|
| 1 | Company | Address | Telephone |
| | Dates From To Employed | Starting Salary | Leaving Supervisor |
| Your Duties: | | | |
| Reason for Leaving: | | | |
| 2 | Company | Address | Telephone |
| | Dates From To Employed | Starting Salary | Leaving Supervisor |
| Your Duties: | | | |
| Reason for Leaving: | | | |
| 3 | Company | Address | Telephone |
| | Dates From To Employed | Starting Salary | Leaving Supervisor |
| Your Duties: | | | |
| Reason for Leaving: | | | |
| 4 | Company | Address | Telephone |
| | Date From To Employed | Starting Salary | Leaving Supervisor |
| Your Duties: | | | |
| Reason for Leaving: | | | |

Extra Curricular Activities or organizations:

***WE ARE AN AT-WILL
EQUAL OPPORTUNITY EMPLOYER***

EDUCATION:

| | NAME AND ADDRESS OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE? | SUBJECT/ MAJOR |
|----------------------|----------------------------|-----------------------|-------------------|----------------|
| Elementary School | | | | |
| High School | | | | |
| College | | | | |
| Specialized Training | | | | |

Are you lawfully entitled to be employed in the United States? Yes No

Have you ever been convicted of a crime except a minor traffic violation? Yes No
{This question pertains only to convictions that have not been sealed or expunged}.

If so, please state citation, date and place where offense occurred: _____

Please provide any additional information such as special skills, training, management experience, equipment operation, or qualifications you feel will be helpful to us in considering your application:

REFERENCES: Three Individuals Not Related To You, Whom You Have Known For At Least One Year.

| NAME | ADDRESS & TELEPHONE | RELATIONSHIP | YEARS ACQUAINTED |
|------|---------------------|--------------|------------------|
| | | | |
| | | | |
| | | | |

Emergency Contact _____

 Name / Street / City / State / Telephone

ACKNOWLEDGEMENT

Please Read Before Signing:

The facts set forth in my application for employment are true and complete. I understand that if employed, false or misleading statements on this application shall be considered immediate cause for dismissal. In making this application for employment I authorize you to make and/or investigate a report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics, and mode of living. This inquiry, if made, also may include information concerning any and all employment discrimination claims and/or accusations brought against me, including, but not limited to, charges and/or accusations brought against me that relate to harassment and/or discrimination involving race, sex, age, religion, disability, and/or national origin.

I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigation or report that is made.

I UNDERSTAND THAT, IF THE COMPANY EMPLOYS ME, EITHER THE COMPANY OR I CAN TERMINATE MY EMPLOYMENT WITH OR WITHOUT CAUSE AT ANY TIME AND FOR ANY OR NO REASON. I also understand that no official of the Company other than the Chief Executive Officer has any authority to enter into an agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.

Signature of Applicant

Date

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EQUAL OPPORTUNITY EMPLOYER***

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

INTERVIEWER

DATE

Employed Yes No

Start Date of Employment _____

Job Title _____

Hourly Rate/
Salary \$ _____

Department _____

By _____

NAME AND TITLE

DATE