



1600 E. 7th Ave. • 2nd Floor • Ybor City, FL 33605 • 813.241.MARY • hamburgermarystampa.com

APPLICATION FOR EMPLOYMENT

J S J CORPORATION DBA HAMBURGER MARY'S®
 700 EAST 17TH AVENUE, DENVER, CO 80203 303-832-1333 FAX 303-832-1444
 WWW.HAMBURGERMARYSDENVER.COM

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We do not discriminate on the basis of race, religion, national origin, color, gender, age, sexual orientation or disability. It is our intent that all applicants be given equal opportunity; and that selection decisions not be based on any of the aforementioned factors.

INSTRUCTIONS

Each question must be fully and accurately answered. Use blank paper if you do not have enough room on the application itself. No action will be taken on this application unless all questions have been answered. PLEASE PRINT except for signature on the last page.

Position Applied For:

Date:

PERSONAL INFORMATION

First Name

Middle Name

Last Name

Address

City

State

Zip Code

Phone Number: ()

Social Security Number:

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

If hired, can you furnish proof that you are eligible to work in the United States? Yes No

Are you available to work: Full Time Part-time Shift Work?

Generally speaking, please indicate your hours/days of availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day							
Night							

Have you ever been convicted of a crime (except minor traffic violations)? Yes No. If yes, please describe the incident (s).

Are you currently employed? Yes No. If yes, may we contact your current employer? Yes No. If no, why not?

Date available for work?

Indicate salary acceptable to you:

Have you applied to this company before? Yes No

Have you been employed by this company or any of its affiliates previously? Yes No. If so, when?

Do you have any relatives, friends or acquaintances working with this company or its affiliates at this time? Yes No. If yes, whom?

Do you smoke any tobacco product? Yes No. Have you ever smoked any tobacco product? Yes No. If yes, how long ago did you quit and for how long did you smoke before quitting?

Is there any information with regard to change of name, use of assumed name or nickname necessary to accurately check your past record?

Do you hold a valid driver's license? Yes No. If yes, list type and number (CDL, restricted, standard, etc.).

Type:

Number:

Has your driver's license ever been suspended or revoked, and if yes, when and for what reason? Yes No

Are you willing to travel in your job? Yes No



MILITARY SERVICE

Military Status:		Active service:	
Rank at discharge:	Type of discharge:	Branch of service:	
Service Duties:			
Have you ever held a military security clearance? <input type="checkbox"/> Yes <input type="checkbox"/> No		Were you ever denied a security clearance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you now or have you ever been a member of any military reserve organization? <input type="checkbox"/> Yes <input type="checkbox"/> No. If so, which branch?			

SPECIAL SKILLS

What machines, equipment, or computer software can you operate, and/or at what speeds do you currently type, take shorthand or enter data, if these things are related to the job for which you are applying? (Be specific.)

What clubs, organizations, civic or other groups have you been a member of in the last five years? (You may leave out any organizations whose name or character might tend to indicate the race, color, religion, sex, age, national origin, disability or ancestry of it's members.) List offices held.

What skills or additional training do you have that are related to the job for which you are applying?

APPLICANT'S CERTIFICATION

Please read carefully and then place your initials in the space at the beginning of each paragraph to verify that you have read, understood and agreed to that section.

Initials:	"I certify that all the information contained in this application and any accompanying resume or other document is true and complete to the best of my knowledge. I understand that false information or omission of information may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date."
Initials:	"I authorize the investigation of any and all statements contained in this application, and further authorize any person, institution, employer (past or present except as previously noted) or individual to provide relevant information and opinions which might be useful in the hiring decision. I further release such persons and organizations from any legal liability for making such statements."
Initials:	"I understand that the company may request investigative reports from a number of sources. These reports may include information as to my credit, character, reputation, personal characteristics, mode of living, criminal record and driving record obtained from interviews with neighbors, friends, former employers, schools and other sources. I understand that I have a right to make a written request within a reasonable time for the disclosure of the name and address of any consumer credit reporting agency used, so that I may obtain a complete disclosure of the nature and scope of the credit investigation."
Initials:	"I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a polygraph exam administered by a qualified polygrapher. I hereby consent to pre- and/or post-employment polygraph exam(s), if and as required by the company, even if no specifically known acts of dishonesty have taken place."
Initials:	"I further understand that I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required."
Initials:	"I UNDERSTAND THAT IF I AM EMPLOYED, EMPLOYMENT WITH THE COMPANY IS "AT WILL", MEANING THAT EITHER THE COMPANY OR I MAY TERMINATE MY EMPLOYMENT AT ANY TIME WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE. I ALSO UNDERSTAND THAT NO EMPLOYEE, REPRESENTATIVE, OFFICE OR SUPERVISOR EXCEPT FOR J. STEWART JACKSON HAS THE AUTHORITY TO ENTER INTO ANY TYPE OF AGREEMENT OR CONTRACT FOR EMPLOYMENT ON ANY BASIS EXCEPT "AT WILL" EITHER VERBALLY OR IN WRITING."

Signature:

Date:



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REFERENCES

List three (3) people (not relatives or former supervisors) with whom you are well acquainted and who can supply information as to your qualifications.

Name:	Address:	City, State, Zip:	Telephone: ()	Occupation:
Name:	Address:	City, State, Zip:	Telephone: ()	Occupation:
Name:	Address:	City, State, Zip:	Telephone: ()	Occupation:

WORK HISTORY

List your last three employers in consecutive order, with the present or most recent employer first. Provide months and years of employment. Optional: Explain any gaps in employment of more than two months.

Name of employer:		Name of Last Supervisor:		
Address:		City, State, Zip:		
Telephone Number: ()		Title:		
Duties	Employed	From:	To:	
Reason for leaving:	Pay	Start:	Finish:	
Name of employer:		Name of Last Supervisor:		
Address:		City, State, Zip:		
Telephone Number: ()		Title:		
Duties	Employed	From:	To:	
Reason for leaving:	Pay	Start:	Finish:	
Name of employer:		Name of Last Supervisor:		
Address:		City, State, Zip:		
Telephone Number: ()		Title:		
Duties	Employed	From:	To:	
Reason for leaving:	Pay	Start:	Finish:	

EDUCATION

LEVEL	NAME & ADDRESS	COURSE OF STUDY	DATES ATTENDED		DEGREE
High School			From:	To:	
Undergraduate College			From:	To:	
Graduate/ Professional			From:	To:	
Other			From:	To:	