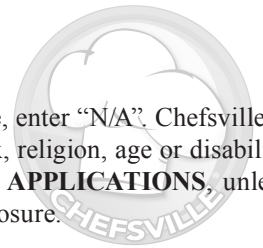


CONTRACT OR EMPLOYMENT APPLICATION



PRINT IN BLACK INK OR TYPE. Fill out application form completely. If questions are not applicable, enter "N/A". Chefsville is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. **RESUMÉS WILL NOT BE ACCEPTED IN LIEU OF APPLICATIONS,** unless specifically stated in the job vacancy notice. This application becomes public record and is subject to disclosure.

APPLICANT INFORMATION	
NAME	DATE OF BIRTH
EMAIL	PHONE
STREET ADDRESS	APT. NO.
CITY	STATE
OTHER NAMES	ZIP CODE
DESIRED POSITION	SSN
	DRIVER LICENSE NO. DRIVER LICENSE STATE

QUESTIONS					
Are you a citizen of the United States of America?	YES	NO	Are you authorized to work in the United States of America?	YES	NO
Have you worked at or with this company before?	YES	NO	If so, when?		
Can you speak any languages other than English?	YES	NO	If so, which languages and how well can you speak?		
Do you have a reliable form of transportation?	YES	NO	Are you able to travel around the Dallas Metroplex and surrounding counties?	YES	NO
Please list any job-related training, skills, or qualifications you possess as well as any proficiencies with job-related machines, office equipment, or software that may be useful in the position you are applying for.					
Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge for any crime, including sexual misconduct, child abuse, offenses against persons or family, or public indecency?				YES	NO
If so, explain in concise detail on a separate page, giving dates and nature of the offense, name and location of the court, and disposition of the case(s).					

AVAILABILITY										
SCHEDULE TYPE	Full-Time	Part-Time	Summer	Temp/Contract	START DATE					
			M	T	W	T	F	S	S	
	MORNINGS (8:00AM–11:59AM)									PREFERRED WAGE
	AFTERNOONS (12:00PM–5:59PM)									PREFERRED HOURS

EMERGENCY CONTACT	
NAME	PHONE
NAME	PHONE

EMPLOYMENT HISTORY		
COMPANY		PHONE
SUPERVISOR NAME		ENDING PAY
STREET ADDRESS		
CITY	STATE	ZIP CODE
JOB TITLE	START DATE	END DATE
JOB DESCRIPTION		
REASON FOR LEAVING		May we use this employer as a reference? YES NO

EMPLOYMENT HISTORY		
COMPANY		PHONE
SUPERVISOR NAME		ENDING PAY
STREET ADDRESS		
CITY	STATE	ZIP CODE
JOB TITLE	START DATE	END DATE
JOB DESCRIPTION		
REASON FOR LEAVING		May we use this employer as a reference? YES NO

REFERENCES <i>Please list two references.</i>		
NAME		RELATIONSHIP
COMPANY	YEARS KNOWN	PHONE
NAME		RELATIONSHIP
COMPANY	YEARS KNOWN	PHONE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I understand that Chefsville will conduct a criminal background check prior to and during my employment, as well as a child abuse registry check and I am subject to random, accident follow-up, and for cause drug testing, as well as post offer drug screening contingent on employment. I agree that an electronic signature is an acceptable method of signature on this and following documents.

X

 SIGNATURE

 PRINT NAME

 DATE