



Oren's Hummus Shop, LLC Employment Application

Oren's Hummus Shop, LLC (OHS) is an equal opportunity employer and makes employment decisions on the basis of merit. OHS policy prohibits unlawful discrimination based on race, color, creed, sex, marital status, age, national origin or ancestry, physical or mental disability, medical condition, veteran status, sexual orientation, or any other consideration made unlawful by federal, state or local laws.

Personal Information *(please print)*

Date _____

Name _____
Last First Middle

Business Telephone () _____ Home Telephone () _____

Cellular Telephone () _____ E-Mail address _____

Present Address _____
No. Street City State Zip

Permanent Address (if different from present address) _____
No. Street City State Zip

Employment Desired

Position applying for: _____

Are you applying for: *(check all that apply)*

- Regular full-time work?
- Regular part-time work?
- Temporary work, e.g., summer or holiday work?

What days and hours are you available for work? _____

If applying for temporary work, during what period of time will you be available?

From _____ To _____

Are you available for work on weekends? Yes _____ No _____

Would you be available to work overtime, if necessary? Yes _____ No _____

If hired, on what date can you start work? _____

Salary desired: _____

Have you ever applied to or worked with OHS before? Yes _____ No _____

If yes, when? _____

Do you have any friends or relatives working for or applying with the OHS? Yes _____ No _____

If yes, state name (s) and relationship _____

Why are you applying for work at the OHS? _____

If hired, would you have a reliable means of transportation to and from work? Yes _____ No _____

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes _____ No _____

If hired, can you present evidence of your legal right to live and work in the United States? Yes _____ No _____

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes _____ No _____

If no, describe the functions that cannot be performed:

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Have you ever been convicted of a criminal offense? (felony or serious misdemeanor) (Convictions for marijuana-related offenses that are more than two years old need not be listed.) Yes _____ No _____

If yes, state nature of the crime(s), when and where convicted, and disposition of the case.

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Are you currently employed? Yes _____ No _____

If so, may we contact your current employer? Yes _____ No _____

Education, Training and Experience

School	Name and Location (City, State)	No. of years completed	Did you graduate?	Degree or Diploma
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/ University			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vocational/ Business			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for this position? If so, please explain:

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer _____					
Address _____					
No.	Street	City	State	Zip	
Type of Business _____					
Telephone No. () _____		Your Supervisor's Name _____			
Your Position: _____					
Job Duties: _____					

Dates of Employment: From _____ To _____					
Starting Salary _____			Ending Salary _____		
Reason for Leaving _____					
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Name of Employer _____					
Address _____					
No.	Street	City	State	Zip	
Type of Business _____					
Telephone No. () _____		Your Supervisor's Name _____			
Your Position: _____					
Job Duties: _____					

Dates of Employment: From _____ To _____					
Starting Salary _____			Ending Salary _____		
Reason for Leaving _____					
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Name of Employer _____					
Address _____					
No.	Street	City	State	Zip	
Type of Business _____					
Telephone No. () _____		Your Supervisor's Name _____			
Your Position: _____					
Job Duties: _____					

Dates of Employment: From _____ To _____					
Starting Salary _____			Ending Salary _____		
Reason for Leaving _____					
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Note: Attach additional page(s) if necessary.

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name _____					
Address _____					
No.	Street	City	State	Zip	
Occupation _____			Number of Years Acquainted _____		
Telephone No. () _____					

Name _____					
Address _____					
No.	Street	City	State	Zip	
Occupation _____			Number of Years Acquainted _____		
Telephone No. () _____					

Name _____					
Address _____					
No.	Street	City	State	Zip	
Occupation _____			Number of Years Acquainted _____		
Telephone No. () _____					

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or on immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Date _____

Applicant's Signature _____