

# Sinaloa Hawaiian Tortillas Inc.

## **Employment Application**

			Applic	ant Informa	ation				
Full Name:	Last		First			<i>M.I.</i>	Date:		
Address:	Street Address						Apartn	nent/Unit #	
	City					State	ZIP Co	ode	
Phone:				Email					
		In ca	se of em	nergency, p	lease n	otify			
Full Name:	-		Relationship:						
A 1.1	Last		First						
Address:	Street Address						Apartn	nent/Unit #	
	City					State	ZIP Co	ode	
Phone:				Email					
			Α	pplying for					
Position:					time:		Part time	::	
			NO Swing S	_ 3 1			YES	NO	
	Sun	Mon	Tue	e W	ed	Thur	Fri	Sa	at
From									
To									
Before? Have you ev before?	ver been employed ver applied for wor ou referred to our	k at Sinaloa H	lawaiian T		YES YES		, When? , When?		
Is a family n	nember or friend c	urrently emplo	yed by us	?					
if so, name?					Relat	ionship			

#### Previous Employment List past and present employers (begin with the most recent) Company: Phone: Address: Job Title: Responsibilities: Reason for Leaving: Supervisor From: To: Company: Phone: Address: Job Title: Responsibilities: Reason for Leaving: Supervisor From: To: Company: Phone: Address: Job Title: Responsibilities: Reason for Leaving: Supervisor From: To: Company: Phone: Address: Job Title: Responsibilities: Reason for Leaving: Supervisor From: To: YES NO Have you listed all past employers? If not, please explain

#### **Education & Skills**

NO

If not, which ones should we not contact?

YES

May we contact the employers listed above?

School	Name and Location	Course / Major	Years (	Complete	ed		Graduate	d?
High			1	2	3	4	YES	NO
College			1	2	3	4	YES	0

Personal Information					
Are you at least 18 years of age? Yes (□) No (□) Can you furnish proof of age? Yes (□) No (□)					
Do you have a car? Yes $(\Box)$ No $(\Box)$ Do you have a valid Hawaii driver's license? Yes $(\Box)$ No $(\Box)$					
All employees must have a current TB clearance card before employment. Your card must be renewed (as required) to continue employment. Do you have a current TB clearance card?  Yes (  ) No (  )					
The Department of Immigration and Naturalization requires that all persons employee by us must provide documents verifying identity and employment eligibility before they may start work. Management will notify potential employees of acceptable documents and will review them at the time employment is offered. If hired, can you provide written evidence that you are authorized to work in the U.S. ? Yes (□) No (□)					
I understand that certain positions in the company require behavior assessments as well as skill and aptitude testing as part of the employment candidate selection process. I am willing to participate in any pre-employment testing of this nature. Yes $(\Box)$ No $(\Box)$					
I understand that Sinaloa Hawaiian Tortillas Inc is a "drug free" workplace and any offer of employment may be subject to successful completion of a drug test. I am willing to undergo drug testing as a condition of employment. Yes ( ) No ( )					
Because of the delay and expense that result from the use of the federal and state court systems, I will agree to use binding arbitration for any and all controversies concerning my employment with Sinaloa Hawaiian Tortillas as a term and condition of employment and that the cost of the arbitration shall be equally divided between me and Sinaloa Hawaiian Tortillas Inc.  Yes ( ) No ( )					
Below is a list of company policies and requirements which applicants should be aware of when applying for employment with Sinaloa Hawaiian Tortillas Inc. Please read these and check each item acknowledging that you have read each one and are willing to abide by them as a condition of employment.					
( ) Management will work as closely with staff members as possible to make schedules convenient. However, scheduling is done on an "as needed" basis and is subject to change from week to week. There are no guaranteed schedules or work locations. Employees may be required to work at other company locations based on business needs. An employee's inability to work flexible shifts to meet business needs may result in reduced hours and modified shifts.					
( ) Our company and staff place a high value on professional accountability. Therefore, tardies and absences are considered as performance behavior and treated according. Tardy is defined as clocking in one minute or more after the scheduled time. Absence is defined as failure to work a shift as scheduled.					
(     Employees are required to attend mandatory company training workshops when assigned. Failure to attend a scheduled workshop will be considered a "no show - no call" and will be subject to appropriate disciplinary action. Employee will be paid for attending workshops and training sessions.					
(     In order to protect the health of our employees and guests, and to comply with local laws, smoking by employees is prohibited within the confines of our factory building. Smoking by employees will be permitted only in designated areas outside while on authorized breaks.					
( Personal hygiene is a critical factor in food safety. In order to maintain the highest level of sanitation and food safety in our restaurants, employees involved on food production and service are not permitted to wear jewelry or watches on the wrists or hands while on duty. ( In order to ensure a safe working environment and prevent injuries to our employees, all employees are required to wear company-approved safety shoes while on duty. All employees are expected to comply with company uniform					
and appearance standards.					

### Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

interview may result in my release. I also authorize any in noted otherwise for purpose of verification.	nvestigation of the above information, except where
I understand that, if hired, my employment will be on an at-w without advance notice.	vill basis and that I may be dismissed or resign at anytime
Signature:	Date:

If this application leads to employment, I understand that false or misleading information in my application or