

Employabull Application



As an equal opportunity employer, Bullritos does not discriminate in hiring or in terms and conditions of employment because of an individual's race, gender, age, religion, disability, national origin, or any other factor which applicable law prohibits from consideration in making a decision regarding employment.

YOUR INFORMATION

Full Legal Name _____

Current Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Other Phone _____

Date of Birth _____ Are you legally authorized to work in the U.S? Yes No

YOUR EDUCATION

Are you currently enrolled in school? Yes No If yes, where? _____

Type of School	Name & Location of School	Number of Years Attended	Did you Graduate?	Degree/Major
High School	Name _____		<input type="radio"/> Yes <input type="radio"/> No	
	City _____ State _____			
College	Name _____		<input type="radio"/> Yes <input type="radio"/> No	
	City _____ State _____			
Other	Name _____		<input type="radio"/> Yes <input type="radio"/> No	
	City _____ State _____			

WHEN ARE YOU AVAIL-A-BULL? (We're closed on Sundays)

Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From						
To						

EMPLOYMENT

Have you been employed by any Bullritos before? Yes No If yes, when and which location? _____

Do you have any relatives currently working for Bullritos? Yes No If yes, who? _____

Position Applying for:

- Burrista (burrito roller) Management Other _____
 Prep Line _____

Looking for: Full Time Part Time Temporary Which Bullritos location? _____

How did you hear about us? Newspaper Walk-In Rehire Website
 Other _____ Friend/Referral – Name _____

YOUR HISTORY List your last three employers beginning with the most recent.

Employer _____	Phone Number _____
Dates _____ to _____	Ending Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
City _____ State _____	Starting Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
Job Title _____	Reason for Leaving _____
Supervisor _____	May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No
Employer _____	Phone Number _____
Dates _____ to _____	Ending Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
City _____ State _____	Starting Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
Job Title _____	Reason for Leaving _____
Supervisor _____	May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No
Employer _____	Phone Number _____
Dates _____ to _____	Ending Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
City _____ State _____	Starting Pay _____ per <input type="radio"/> hour <input type="radio"/> week <input type="radio"/> year
Job Title _____	Reason for Leaving _____
Supervisor _____	May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No

YOUR REFERENCES Provide names of three people not related to you.

Full Name _____	Relationship _____	Years Known _____
Address _____	Phone _____	
Full Name _____	Relationship _____	Years Known _____
Address _____	Phone _____	
Full Name _____	Relationship _____	Years Known _____
Address _____	Phone _____	

AUTHORIZATION AFFIDAVIT

I hereby affirm that the information given by me on this application for employment is complete and accurate. I understand that any falsification or omission will be immediate grounds for dismissal. I authorize a thorough investigation to be made in connection with this application concerning my character, general reputation, employment and education background, and criminal record, whichever may be applicable. I understand what this investigation may include and I hereby authorize the release of documents, and personal interviews with third parties, such as prior employers, family members, business associates, financial sources, friends, neighbors or others with whom I am acquainted. I further understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of the nature and scope of the investigation.

It is understood that, as a condition of initial or continued employment, I agree to submit to such lawful examinations, medical, substance abuse, or other, as may be required by the Company.

I hereby agree to submit to binding arbitration of all disputes and claims arising out of the submission of this application. Binding arbitration shall be conducted through the American Arbitration Association and pursuant of their rules for employment disputes. I agree and acknowledge that in the event that I am hired by Bullritos that all disputes that cannot be resolved by informal, internal resolution, whether during or after my employment, will be submitted to binding arbitration. I acknowledge that Bullritos' Arbitration Agreement and its Dispute/Resolution Policy apply to me as an applicant of Bullritos.

If I am hired, I agree that my employment and compensation can be terminated with or without cause and without notice, at any time, at the option of the Company or myself.

Applicant's Signature _____ Date _____