

Employment Application Form

PLEASE PRINT ALL INFORMATION
REQUESTED EXCEPT SIGNATURE

Name _____
Last
First
Middle

Present address _____
Number
Street
City
State
Zip

How long _____ Telephone (____) _____

Are you under eighteen years of age? Yes No Cell Phone (____) _____

Are you legally authorized to work in the United States? Yes No

If you are hired, will you be able to submit proof of the above? Yes No

Are you now or will you at any time be seeking visa sponsorship? Yes No

E-mail Address: _____ Days/hours available to work
 No Pref. _____ Thu _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

Position applied for (1) _____
 and salary desired (2) _____
 (Be specific)

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired F/T ONLY P/T ONLY TEMPORARY FLEXIBLE FOR ALL WORK ASSIGNMENTS

When are you available for work? _____

Work Experience Please list your work experience for the **past 10 years** beginning with your most recent job held. You may include work performed on a volunteer basis. Please account for any time period between positions when you were not working. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Organization.

Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		

Work Experience (cont'd)**PAGE 2**

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Organization.

Name of employer _____	Name of last supervisor	Employment dates	Pay or salary
Address _____ City, State, Zip Code _____		From To	Start Final
Phone number _____	Your Last Job Title		

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Name of employer _____	Name of last supervisor	Employment dates	Pay or salary
Address _____ City, State, Zip Code _____		From To	Start Final
Phone number _____	Your Last Job Title		

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List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Organization.

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

May we contact your present employer? Yes No

PLEASE DO NOT RESPOND TO THE FOLLOWING QUESTION UNTIL **AFTER** YOU HAVE READ AND/OR DISCUSSED THE JOB DESCRIPTION OF THE POSITION(S) FOR WHICH YOU ARE APPLYING.

Are you able to perform the essential functions of the position(s) for which you are applying, with or without a reasonable accommodation?

Yes No

PLEASE READ THE FOLLOWING CAREFULLY:**APPLICATION FORM WAIVER**

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of the Organization's employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Organization practices, shall serve to create an actual or implied contract of employment, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the CEO of the Organization and the employee. Both the undersigned and the Organization may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Organization may unilaterally change or revise its benefits, policies and procedures and such changes may include reduction in benefits.

I understand that this application is not a contract of employment and does not assure me of a position with the Organization. I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this if I am offered the job.

I understand that the Organization will thoroughly investigate my work and personal history and verify all data given on the application, on related papers, and in interviews. I authorize the Organization to investigate all information related to my application and all statements contained in this application in order to determine my qualifications for employment and I understand that such investigation may include contacting any of my former and/or current employers or any person or entity listed on this application or any resume that I have attached to this application (unless otherwise indicated). I hereby give the Organization permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Organization (including its employees and agents) from any liability as a result of such contact.

I also understand that if (1) the Organization has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that any offer of employment, and continued employment, are conditioned upon the satisfactory completion of a background check, including but not limited to a criminal records check and driving record check, as determined in the sole discretion of the Organization. I understand that, in connection with the routine processing of this application, the Organization may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Organization will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I certify that all the statements herein are true and understand that any omission, misrepresentation, or falsification in connection with this application process may be grounds for denial of employment or, if I am hired, immediate termination of my employment regardless of when or how discovered.

Signature of applicant _____ Date: _____

Basho Japanese Brasserie/Douzō Modern Japanese/ShabuMaru Restaurant is an Equal Opportunity Employer. Basho Japanese Brasserie/Douzō Modern Japanese/ShabuMaru Restaurant offers equal employment opportunity to all applicants for employment and all employees regardless of race, color, religion, sex, national origin, age, disability, genetic information, veteran status, ancestry, sexual orientation, gender identity, military service, participation in Basho Japanese Brasserie/Douzō Modern Japanese Restaurant's insurance plans, receipt of free medical care, or any other characteristic protected by applicable law. An applicant who does not meet the minimum qualifications of the position(s) for which the applicant applies will not be considered for employment. This policy applies to all areas of employment, including recruitment, hiring, training and development, promotion, transfer, termination, layoff, compensation, benefits, social and recreational programs, and all other conditions and privileges of employment, in accordance with applicable federal, state, and local laws.

Thank you for completing this application form and for your interest in our organization.