



EMPLOYMENT APPLICATION

Please print or type and complete all sections.

Please return completed application to:
 Maximilien 81 A Pike Street
 Seattle WA 98101 (206) 682 7270
<http://www.MaximilienRestaurant.com>

POSITION

Position applied for: _____ From what source did you learn about the position? _____
 Days & Hours available to work: _____ Expected Rate of Pay: _____

PERSONAL INFORMATION

Name: _____
Last First Middle Initial

Address: _____
Number Street Apt No. City State Zip Code

Home Phone: (_____) _____ Business Phone: (_____) _____

If offered a position, will you be able to provide identification and proof of eligibility to work in the United States?
 Yes No

EDUCATION / TRAINING / SPECIAL QUALIFICATIONS

Highest Grade Completed: _____ I possess a: High School Diploma School: _____
 GED Certificate or High School Proficiency

College / University / Trade School or Special Training	Course of Study / Major	Date Degree of Certificate Awarded	Type of Degree or Certificate

Languages, other than English, for which you are fluent:

Read: _____ Write: _____
 Read: _____ Write: _____

EMPLOYMENT HISTORY / WORK EXPERIENCE

Begin with your most recent experience and list all positions within the past ten years, including military experience and volunteer positions. **Complete this section even if you attach a resume.** (If you need more room, you may attach an additional sheet.) Complete all sections.

Employer: _____ Phone: (_____) _____
 Address: _____
Number Street Suite No. / Mailstop City State Zip Code

Last Position: _____ Employed from: _____ to _____ Last Rate of Pay: _____
 Average Number of Hours Per Week Worked: _____ Supervisor Name / Title: _____
 Duties and Responsibilities: _____
 Reason for Leaving: _____

Employer: _____ Phone: (_____) _____

Address: _____
Number Street Suite No. / Mailstop City State Zip Code

Last Position: _____ Employed from: _____ to _____ Last Rate of Pay: _____

Average Number of Hours Per Week Worked: _____ Supervisor Name / Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

Employer: _____ Phone: (_____) _____

Address: _____
Number Street Suite No. / Mailstop City State Zip Code

Last Position: _____ Employed from: _____ to _____ Last Rate of Pay: _____

Average Number of Hours Per Week Worked: _____ Supervisor Name / Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

Employer: _____ Phone: (_____) _____

Address: _____
Number Street Suite No. / Mailstop City State Zip Code

Last Position: _____ Employed from: _____ to _____ Last Rate of Pay: _____

Average Number of Hours Per Week Worked: _____ Supervisor Name / Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

APPLICANTS' AGREEMENT / RELEASE / CERTIFICATION

Certification:

I certify that the information given by me in this application is true and complete in all respects to the best of my knowledge and beliefs, and I agree that any false statements or omissions shall be considered sufficient cause for disqualification or dismissal. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Maximilien and myself for either employment or for providing of any benefit. No promises regarding employment have been made to me.

Authorization to Release Employment Records:

I authorize Maximilien to obtain information from prior and current employers, unless noted differently below, except any information about a disability and medical condition which is prohibited by law under the Americans with Disabilities Act. Information that may be obtained may include, but is not limited to, achievement, performance, attendance, personal history, and disciplinary information. I direct prior and current employers to release such information upon request of the duly accredited representative Maximilien regardless of any agreement I may have had with you previously to the contrary. I release any individual, including records custodians, from all liability for damages that may result to me on account of compliance or any attempts to comply with this authorization.

- I give permission for background/reference/employment checks to be done upon being placed on an eligible list.
- I give permission for background/reference/employment checks to be done upon being placed on an eligible list, except from my current employer. Information from my current employer may be obtained only after an extension of a conditional job offer.
- I do not give permission for background/reference/employment checks to be done.

Explanation: _____

I have read, understand and agree to the information noted above:

Signature of Applicant

Date Signed