

Since 1977



# Patrick S. Molak Corp. Application for Employment

Position applying for: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ Date you can start: \_\_\_\_\_  
LAST FIRST MI

Email Address \_\_\_\_\_ Phone No (s) \_\_\_\_\_

Present Address \_\_\_\_\_  
STREET CITY STATE ZIP

Permanent Address \_\_\_\_\_  
STREET CITY STATE ZIP

Are you eligible for employment in the USA? Yes \_\_\_\_\_ No \_\_\_\_\_ Salary Requirements: \_\_\_\_\_

Have you ever been employed by Patrick S. Molak Corp? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, where? \_\_\_\_\_

Do you have a current TABC card? Yes \_\_\_\_\_ No \_\_\_\_\_ Do you have a current Comal County Food Handlers card? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you of legal age to consume alcohol? Yes \_\_\_\_\_ No \_\_\_\_\_ Age if less than 18 yrs: \_\_\_\_\_

In case of emergency, notify:	
Name: _____	Phone No. _____
Address _____	
STREET	CITY STATE ZIP

How were you referred us (if newspaper, which one)? \_\_\_\_\_

Please name friends/family that work for Patrick S. Molak Corp: \_\_\_\_\_

### AVAILABILITY TO WORK (Please check when available)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM Shift	_____	_____	_____	_____	_____	_____	_____
PM Shift	_____	_____	_____	_____	_____	_____	_____

Can you work holidays? Yes \_\_\_\_\_ No \_\_\_\_\_  
Can you work nights? Yes \_\_\_\_\_ No \_\_\_\_\_

### EDUCATION

		Circle years completed				Year Graduated
High School		9	10	11	12	
College		1	2	3	4	
Other Training						

## **ACTIVITIES**

List high school and college activities, in which you are involved, leadership positions held, honors received.

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To what community, social, & professional organizations do you belong? Also list offices held.

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What hobbies or recreational activities do you enjoy?

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What book, magazines, journals, etc, do you read frequently?

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## **PERSONAL & PROFESSIONAL GOALS**

**The following questions are designed to provide insight into your goals & ambitions.**

What are your personal/professional goals for the next twelve months?

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Why do you want to work in a restaurant?

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What reservations do you have about working in a restaurant?

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## **EMPLOYMENT HISTORY**

Starting with your present or last employer: List all firms with whom you have worked in the last 5 years. Include periods of unemployment, suspension from work, self-employment, & any jobs held while in school. Use additional sheets if more space is necessary.

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Name of firm: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Address: \_\_\_\_\_ **Phone No (including area code)** \_\_\_\_\_  
Position Held: \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Immediate Supervisor's Name: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

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Position Held: \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties: \_\_\_\_\_  
Immediate Supervisor's Name: \_\_\_\_\_  
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Name of firm: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Address: \_\_\_\_\_ **Phone No (including area code)** \_\_\_\_\_  
Position Held: \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties: \_\_\_\_\_  
Immediate Supervisor's Name: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

## **REFERENCES**

List persons who have known you well for at least 3 years. No relatives or former employers please.

Name & Occupation	Years Known	(Area Code) Phone No.	Address

**Background Check**

Within the last ten years, have you been convicted of, pled guilty to, or received deferred adjudication for, any crime other than a minor traffic violation?

Yes \_\_\_\_\_ or No \_\_\_\_\_

If yes, describe:

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➤ **I understand that one of the conditions for working at Patrick S. Molak Corp. is that I must be able to work weekends and holidays. I also understand that should my availability to work weekends and holidays change, I may be terminated due to lack of work.**

**Initial:** \_\_\_\_\_

**I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.**

**In consideration of my employment, I agree to conform to Patrick S. Molak Corp rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause or notice, at any time, at either my or Patrick S. Molak Corp. option. I also understand and agree that Patrick S. Molak Corp. may change terms and conditions of my employment, with or without cause or notice at any time**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_