



Em's Original Sub Shop

It's not just a sub... It's an Em's Sub!

This information will not be the only basis for hiring decisions. You are not required to furnish any information that is prohibited by federal, state or local law.

Last name _____ First _____ Middle _____ Social security number _____

Home address _____ City _____ State _____ Zip code _____ Email _____

Home phone number _____ Alternate phone number _____ Date of Application _____

Date Available: _____ Earnings expected: _____ Position & Location for which applying: _____

Have you ever been employed by Em's Original Sub Shop? Yes _____ No _____ If so, where? _____

Do you have a geographic/location preference? _____

Who referred you to Em's Original Sub shop? _____

What are your career objectives? _____

Em's Original Sub Shop employs only United States citizens and aliens lawfully authorized to work in the United States. In compliance with the Immigration Reform and Control Act of 1986, Em's Original Sub Shop requires all new employees to complete the employment verification form (I-9) and to provide legally sufficient documentation of identity and employment eligibility.

Can you provide required proof of your identity and that you are eligible to work in the United States? Yes _____ No _____

Are you at least 18 years of age? Yes _____ No _____

Any convictions, guilty plea or plea of nolo contendere will be considered only insofar as it relates to your suitability for employment in the position(s) for which you are applying and will not necessarily disqualify you from employment.

Have you ever been convicted of or pled guilty or nolo contendere to a misdemeanor or felony? Yes _____ No _____

If yes, explain _____

This corporation is an equal opportunity employer. No question on this application is asked for the purpose of limiting or excluding any applicant's consideration for employment because of his or her race, color, religion, age, sex, national origin, handicap, sexual orientation or veteran status or any other characteristic protected by Federal, State or Local Law.

EDUCATION:

Do you have a GED or equivalent? Yes No

Mark highest completed year

High School 1__ 2__ 3__ 4__

Technical/College/ 1__ 2__ 3__ 4__

Graduate School 5__ 6__ 7__ 8__

Educational Institution

Name and location	Did you graduate		Degree	Major/Minor	Final grade point average	Extracurricular activities, honors and awards
	Yes	No				
High School:						

Part-time and summer work:

Other courses, seminars, training or participated in:

MILITARY EXPERIENCE:

If in service, indicate branch:

Date (mo/yr) entered:

Date (mo/yr) discharged:

Nature of duties:

Military Awards received:

Rank at discharge:

Nature of discharge:

BUSINESS EXPERIENCE: (Please start with your present or most recent position and use additional pages if necessary)

A. Firm _____ Address _____
 City _____ State _____ Zip _____ Phone _____
 Kind of business _____ Employed from _____ To _____
 Title _____ Initial Compensation \$ _____ Final total compensation \$ _____ Base \$ _____ Bonus \$ _____
 Supervisory responsibility _____ Name & title of immediate supervisor _____
 What (do)(did) you like most about your job? _____
 What (do)(did) you least enjoy? _____
 Reasons for leaving or desiring to change _____

B. Firm _____ Address _____
 City _____ State _____ Zip _____ Phone _____
 Kind of business _____ Employed from _____ To _____
 Title _____ Initial Compensation \$ _____ Final total compensation \$ _____ Base \$ _____ Bonus \$ _____
 Supervisory responsibility _____ Name & title of immediate supervisor _____
 What did you like most about your job? _____
 What did you least enjoy? _____
 Reasons for leaving _____

C. Firm _____ Address _____
 City _____ State _____ Zip _____ Phone _____
 Kind of business _____ Employed from _____ To _____
 Title _____ Initial compensation \$ _____ Final total compensation \$ _____ Base \$ _____ Bonus \$ _____
 Supervisory responsibility _____ Name & title of immediate supervisor _____
 What did you like most about your job? _____
 What did you least enjoy? _____
 Reasons for leaving _____

Other Positions held:

D.	E.	F.
Company: _____	Company: _____	Company: _____
Location: _____	Location: _____	Location: _____
Title: _____	Title: _____	Title: _____
Name of supervisor: _____	Name of supervisor: _____	Name of supervisor: _____
Start Date: _____ End Date: _____	Start Date: _____ End Date: _____	Start Date: _____ End Date: _____
Initial compensation: _____	Initial compensation: _____	Initial compensation: _____
Final compensation: _____	Final compensation: _____	Final compensation: _____
Type of work: _____	Type of work: _____	Type of work: _____
Reason for leaving: _____	Reason for leaving: _____	Reason for leaving: _____

Indicate by letter any of the above employers you do not want us to contact. _____

ACTIVITIES:

Membership in professional or job-relevant organizations. (You may exclude groups that indicate race, color, religion, national origin, disability or other protected status.)

What qualifications, abilities, and strong points will help you succeed in this job?

What are your weaker points and areas for improvement?

Is there any additional information you would like to share?

REFERENCES:

Name:	Name:	Name:
Title:	Title:	Title:
Phone:	Phone:	Phone:
Email:	Email:	Email:
Relationship:	Relationship:	Relationship:
Years known:	Years known:	Years known:

Certification

I certify that the above information is complete and accurate to the best of my knowledge. I understand that falsification, misrepresentation or omission of facts in the application will disqualify me from further consideration or, if I am hired, will be sufficient cause for my immediate dismissal. **I understand that any employment offer made to me is contingent upon reference checks, driving records (when applicable), pre-employment medical screen (when applicable), proof of Visa/work permit/citizenship, criminal background check and pre-employment drug screening.**

I authorize Em's Original Sub Shop (the "Company") to investigate, in its discretion, my past employment history, personal references or other types of information provided in this application, and I agree to execute the Company's separate authorization form providing my consent to background checks. I authorize my past employers, all references, and any other persons to answer all questions asked by the Company concerning my education, abilities, and previous employment record. I release all such persons and Em's Original Sub Shop from any and all liability or damages on account of having furnished such information.

I acknowledge that, in the event of my hire, any employment relationship with the Company is "at will", which means that I may resign at any time and the Company may discharge me at any time with or without cause. I further understand this "at will" employment relationship may not be changed by any written document, by oral statement, or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the company.

I hereby acknowledge that I have read the above statements and understand them completely:

Date: _____ Applicant's Signature: _____

This application does not in any way assure you employment with this company. You will receive formal notification if any employment is available for you. This application is to be completed to the best of your knowledge. If you do not answer every question in this application, it will not be processed. Information you provide may be checked and if found to be false, the company may void your application. The company reserves the right after employment to require that you furnish appropriate evidence to support statements made by you. A misstatement found after hiring may cause your immediate dismissal. This application is void after a period of 12 months. If you have not been hired within that period, a new application must be completed for future employment consideration.