

# EMPLOYMENT APPLICATION

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ADDRESS \_\_\_\_\_  
FIRST NAME MIDDLE INITIAL LAST NAME

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE # \_\_\_\_\_ ARE YOU 18 OR OLDER? Y / N IF NOT, GIVE BIRTHDATE \_\_\_\_\_

HAVE YOU EVER WORKED AT AN ICEBERG DRIVE-INN? Y / N IF YES, GIVE DATES \_\_\_\_\_ TO \_\_\_\_\_ GIVE ICEBERG LOCATION \_\_\_\_\_

## AVAILABILITY

TOTAL HOURS AVAILABLE PER WEEK \_\_\_\_\_

ARE YOU LEGALLY ABLE TO BE EMPLOYED IN THE U.S.? Y / N

HOURS AVAIL.	M	T	W	TH	F	SA	SU
<b>FROM</b>							
<b>TO</b>							

HOW DID YOU HEAR ABOUT JOB? \_\_\_\_\_ HOW FAR DO YOU LIVE FROM RESTAURANT? \_\_\_\_\_ OWN TRANSPORTATION? Y / N

## SCHOOL MOST RECENTLY ATTENDED

NAME OF SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TEACHER/COUNSELOR \_\_\_\_\_ DEPARTMENT \_\_\_\_\_ LAST GRADE COMPLETED \_\_\_\_\_ GPA \_\_\_\_\_

GRADUATED? Y / N CURRENTLY ENROLLED? Y / N

## THREE MOST RECENT JOBS

COMPANY \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ JOB DESCRIPTION \_\_\_\_\_ SUPERVISOR NAME \_\_\_\_\_

WAGE \_\_\_\_\_ DATES WORKED \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

COMPANY \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ JOB DESCRIPTION \_\_\_\_\_ SUPERVISOR NAME \_\_\_\_\_

WAGE \_\_\_\_\_ DATES WORKED \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

COMPANY \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ JOB DESCRIPTION \_\_\_\_\_ SUPERVISOR NAME \_\_\_\_\_

WAGE \_\_\_\_\_ DATES WORKED \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

**IMPORTANT: COMPLETE OTHER SIDE OF APPLICATION**

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**PERSONAL REFERENCES**

NAME \_\_\_\_\_

NAME \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

DURING THE PAST 7 YEARS, HAVE YOU EVER BEEN CONVICTED OF, PLED GUILTY TO OR PLED NO CONTEST TO A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS? YES / NO IF YES, DESCRIBE IN FULL \_\_\_\_\_

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1. I certify that I have read and fully completed both sides of this application and that the information contained on this application is correct to the best of my knowledge and understand that any omission or erroneous information is grounds for dismissal in accordance with the policy of this independent Iceberg Drive-inn franchisee. 2. I authorize the references listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. 3. I acknowledge that this independently owned and operated Iceberg Drive-inn franchisee reserves the right to amend or modify the policies in its Employee Handbook and other policies of this Iceberg Drive-inn franchisee at any time, without prior notice. These policies do not create any promises or contractual obligations between this independent Iceberg Drive-inn franchisee and its employees. At this Iceberg Drive-inn franchise, my employment is at will. This means I am free to terminate my employment at any time, for any reason, with or without cause, and this Iceberg Drive-inn franchise retains the same rights. The independent Owner/Operator of this Iceberg Drive-inn franchise is the only person who may make an exception to this, and it must be in writing and signed by the Owner/Operator. I understand that my employer is an independent Owner/Operator of an Iceberg Drive-inn franchise and that I am not employed by Iceberg Drive-inn Corporation or any of its subsidiaries. The independent Owner/Operator of this restaurant is solely responsible for all terms, condition and any other issues concerning my employment.

This independent Iceberg Drive-inn franchise is an Affirmative Action and Equal Opportunity Employer. Various Federal, State and Local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability or veterans status. It is this Iceberg Drive-inn franchise policy to comply fully with these laws, as applicable, and information requested on this application will not be used for any purpose prohibited by law.

I understand that as a part of the procedure for my employment application, an investigative consumer report may be made concerning my character, general reputation, personal characteristics and mode of living. Upon written request, additional disclosure concerning the complete nature and scope of the investigation will be provided. If I am denied a job based either wholly or in part because of information contained in an investigative consumer report, I will be provided the name and address of the reporting agency that supplies the information.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

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**THIS AREA FOR OFFICE USE ONLY**

Reference checks \_\_\_\_\_

Date interviewed \_\_\_\_\_ By \_\_\_\_\_

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# This Employer Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

**IMPORTANT:** If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or

citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

## NOTICE:

**Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.**

**Employment Verification.**  **Done.**

For more information on E-Verify, please contact DHS at:

**1-888-464-4218**



E-VERIFY IS A SERVICE OF DHS AND SSA

# Este Empleador Participa en E-Verify



Este empleador le proporcionará a la Administración del Seguro Social (SSA), y si es necesario, al Departamento de Seguridad Nacional (DHS), información obtenida del Formulario I-9 correspondiente a cada empleado recién contratado con el propósito de confirmar la autorización de trabajo.

**IMPORTANTE:** En dado caso que el gobierno no pueda confirmar si está usted autorizado para trabajar, este empleador está obligado a proporcionarle las instrucciones por escrito y darle la oportunidad a que se ponga en contacto con la oficina del SSA y, o el DHS antes de tomar una determinación adversa en contra suya, inclusive despedirlo.

Los empleadores no pueden utilizar E-Verify con el propósito de realizar una preselección de aspirantes a empleo o para hacer nuevas verificaciones de los empleados actuales, y no deben

restringir o influenciar la selección de los documentos que sean presentados para ser utilizados en el Formulario I-9.

## A V I S O:

**La Ley Federal le exige a todos los empleadores que verifiquen la identidad y elegibilidad de empleo de toda persona contratada para trabajar en los Estados Unidos.**

A fin de poder determinar si la documentación del Formulario I-9 es válida o no, este empleador utiliza la herramienta de selección fotográfica de E-Verify para comparar la fotografía que aparece en algunas de las tarjetas de residente y autorizaciones de empleo, con las fotografías oficiales del Servicio de Inmigración y Ciudadanía de los Estados Unidos (USCIS).

Si usted cree que su empleador ha violado sus responsabilidades bajo este programa, o ha discriminado en contra suya durante el proceso de verificación debido a su lugar de origen o condición de ciudadanía, favor ponerse en contacto con la Oficina de Asesoría Especial llamando al 1-800-255-7688 (TDD: 1-800-237-2515).

**Employment Verification.**  **Done.**

Para mayor información sobre E-Verify, favor ponerse en contacto con la oficina del DHS llamando al:

**1-888-464-4218**



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