



**Lutroo Restaurant Group LLC**  
An Independent Penn Station Franchisee

Date of Application: \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT- EQUAL OPPORTUNITY EMPLOYER**

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Phone</b>
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>

Date you can start \_\_\_\_\_

Are you 18 or older? Yes \_\_\_\_\_ No \_\_\_\_\_. If No, How Old Are You? \_\_\_\_\_

If no, can you furnish a work permit? \_\_\_\_\_

**Have you ever worked at a Penn Station Franchise?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, which location? \_\_\_\_\_ What dates? \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

*(A "yes" answer does not automatically disqualify you from employment since the nature and seriousness of the offense, date and the job for which you are applying will also be considered)*

**WHEN ARE YOU AVAILABLE TO WORK**

Days \_\_\_\_\_ Nights \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

**EDUCATION**

School	Name & Location of School	Course of Study	Years Completed
High School			
College			
Other			

**TWO MOST RECENT JOBS**

Company		Location	
Phone	Supervisor		
Job Description	Dates Employed From:		To:
Salary/Wage Per Hour	Reason for leaving		

Company		Location	
Phone	Supervisor		
Job Description	Dates Employed From:		To:
Salary/Wage Per Hour	Reason for leaving		

## REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year.

	Name	Address	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I certify that the statements contained in this application and any other documents submitted in connection with my application for employment and the statements made during any interview process are true and complete to the best of my knowledge.

I give Employer the right to make a thorough investigation of my past employment, education, and activities, and I release from all liability all persons, firms, and organizations supplying any such information. I indemnify Employer and all persons, firms and organizations against any liability that might result from making this investigation.

I understand that any false answer or statement or implication made by me in this application or other documents may, in the discretion of Employer, result in denial of employment or, if hired, in my discharge.

I understand the company reserves the right to monitor my use of social media, including but not limited to blogs and social networking websites, regardless of personal time with a home computer, smart phone or any other web capable device. I have no right to privacy with respect to social media, networking or online blogging with regard to any communication that could be interpreted to negatively affect the Company. While I am on Company time, I should refrain from online activities that bring no value to the Company.

I also understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Employer and me either for employment or for the providing of any benefit. Additionally, I understand that, if I am hired, no oral or written promise made today or in the future, or anything else that is said or done by Employer today or in the future, including, but not limited to, the establishment of any employment practice or the creation and/or distribution of any written employment policies or benefit plans, constitutes or provides a basis for an employment contract between Employer and me either for continued employment or for the providing of any benefit. Only an express promise, made in writing and signed by me and the President of Employer, can create a contract that is binding on Employer. I acknowledge that no promises regarding employment have been made to me. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that Employer retains the right to terminate my employment with or without cause, and with or without notice, at any time. In other words, I understand that my employment is at-will.

My signature below confirms that I have read the above paragraphs and understand them.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Person to Notify in Emergency

Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_