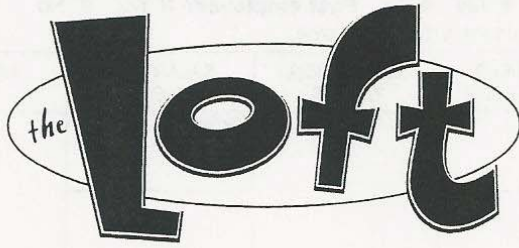


# EMPLOYMENT APPLICATION



VARIOUS FEDERAL, STATE AND LOCAL LAWS PROHIBIT DISCRIMINATION BASED ON RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, DISABILITY OR MARITAL STATUS. THE LOFT IS AN EQUAL OPPORTUNITY EMPLOYER AND YOUR RESPONSE TO ANY QUESTION WILL NOT BE USED AS A BASIS FOR DISCRIMINATION, BUT WILL BE JUDGED ON ITS RELEVANCE TO THE POSITION YOU ARE SEEKING.

## Personal Information

Name (Last)	(First)	(Middle)	Social Security No.								
Home Address		City	State	Zip							
Home Telephone ( ) ( )		Business Telephone ( ) ( )		May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Position Applying For: _____		Days and hours available.	Day	M	T	W	TH	F	SAT	SUN	
Date Available: _____ Are you interested in (check all that apply): <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer			From								
			To								
Are you willing to travel to other locations? <input type="checkbox"/> Yes <input type="checkbox"/> No			If you are under 18 years of age, please state your date of birth:								
How were you referred to The Loft?											

## Education

Type of School	Name and Location of School			Degree / Area of Study	Number of Years Attended	Graduated (Check One)
High School	Name	Address				<input type="checkbox"/> Yes <input type="checkbox"/> No
	City	State	Zip			
College	Name	Address				<input type="checkbox"/> Yes <input type="checkbox"/> No
	City	State	Zip			
Graduate School	Name	Address				<input type="checkbox"/> Yes <input type="checkbox"/> No
	City	State	Zip			
Other	Name	Address				<input type="checkbox"/> Yes <input type="checkbox"/> No
	City	State	Zip			

## Extracurricular Activities / Hobbies

Please list all school activities and sports


## Legal

Are you a U.S. citizen or do you have the legal right and necessary documents to work in the U.S.?  Yes  No  
(Identity and employment eligibility of all new hired will be verified as required by the Immigration Reform and Control Act of 1986).

Were you ever discharged by any company?  Yes  No If yes, give name of company(ies) \_\_\_\_\_

Reason for discharge \_\_\_\_\_

## Employment History

List employment starting with your most **recent** position. Accounting for any time during this period that you were unemployed by stating nature of your activities. **May we contact your present employer?** ■ Yes ■ No **Past employer?** ■ Yes ■ No  
Please indicate if you were employed under a different name.

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION HELD AND SUPERVISOR	LIST MAJOR DUTIES	SALARY OR WAGES	REASON FOR LEAVING
FROM ____/____/____ Mo. Year	Name	Your Job Title		Starting	
	Address City State	Supervisor		Final	
	TO ____/____/____ Mo. Year	Phone ( )			
FROM ____/____/____ Mo. Year	Name	Your Job Title		Starting	
	Address City State	Supervisor		Final	
	TO ____/____/____ Mo. Year	Phone ( )			
FROM ____/____/____ Mo. Year	Name	Your Job Title		Starting	
	Address City State	Supervisor		Final	
	TO ____/____/____ Mo. Year	Phone ( )			
FROM ____/____/____ Mo. Year	Name	Your Job Title		Starting	
	Address City State	Supervisor		Final	
	TO ____/____/____ Mo. Year	Phone ( )			

Have you previously worked for The Loft Hawaiian Restaurants or any of its subsidiaries or franchisees? ■ Yes ■ No

Name \_\_\_\_\_ Location \_\_\_\_\_  
City, State and Zip \_\_\_\_\_ Position Held \_\_\_\_\_  
Supervisor \_\_\_\_\_ Dates Employed From \_\_\_\_\_ to \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

## References

Business references: (do not list relatives) Please indicate if you were employed under another name.

Name	Address	Work Phone No.	Title	Years Known
		( )		
		( )		
		( )		

## Please read carefully

I understand that, with my authorization, an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and / or criminal history.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of The Loft.

I understand and agree that if employed, the employment will be "at will". That is, either I or The Loft may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by The Loft does not imply employment and that this application and / or any other documents are not contracts of employment.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_