



Employment Application

PERSONAL

NAME _____ SOCIAL SECURITY NUMBER _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

() _____ - _____ DATE OF BIRTH _____ REFERRED by _____

AREA CODE & PHONE NUMBER

ARE YOU EMPLOYED NOW? _____ If so may we inquire of your present employer? _____

Have you applied here before? _____ Salary Desired \$ _____

Date you can Start ___/___/___ Position Desired _____ Days ___ Nights ___

Education and Training				
	Name and Location	Yr. Completed	Graduate	Major
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Additional Training	_____	_____	_____	_____

What languages other than English do you speak fluently? _____

Read? _____ Write? _____

What personal contribution (s), do you feel, you could make if you were employed by us?

Work Experience

(List below your last four (4) Employers, Starting with the last one first)

Dates Employed	Company, Supervisor & Ph.#	Salary	Position	Reason for Leaving
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

References

(List the names of three persons not related to you, whom you have known at least one year)

NAME	ADDRESS / PHONE NO.#	RELATIONSHIP	Years Known
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

IN CASE OF EMERGENCY

Person to Notify: _____ Ph. (____) ____ - _____

Address: _____

I hereby affirm that the information provided on this application and/or résumé is true and complete to the best of my knowledge. I am aware that any falsified information may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I authorize the investigation of my past employment and agree to cooperate in such investigation, and release from all liability persons and corporations requesting or supplying information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am considered or any future job in the event I am hired. I hereby agree to submit to any lawful drug, or skill testing that may be required as a condition for employment or continued employment and understand that unless otherwise prohibited by law, refusal to submit to such testing may result in my immediate discharge. I further agree to submit to search of my person or other personal belongings if my integrity and/or honesty come into question as a result of my actions or the actions of others that may have influenced me during the course of my employment. I have received and read the "Message From CHUY'S" and willingly accept these terms and its philosophy for employment.

Employee Signature

____/____/____
Date

I UNDERSTAND THIS IS AN EMPLOYMENT-AT-WILL COMPANY. MEANING EITHER EMPLOYEE OR EMPLOYER MAY TERMINATE THIS EMPLOYMENT RELATIONSHIP AT ANY TIME FOR ANY REASON