



519 SOUTH FAIRFAX AVENUE
LOS ANGELES, CALIFORNIA 90036
PHONE 323-938-8800
FAX 323-938-8107

APPLICATION FOR EMPLOYMENT

PLEASE ANSWER ALL QUESTIONS; THIS FORM IS AN INDICATION OF YOUR ABILITIES AND IS AN INTEGRAL PART OF THE SELECTION PROCESS.

POSITION APPLYING FOR _____ DESIRED SALARY _____

FULL-TIME / PART-TIME (CIRCLE)

Mäni's will not discriminate against applicants for employment on any legally-recognized basis including, but not limited to: veteran status, race, color, religion, sex, marital status, sexual orientation, ancestry, national origin, physical or mental disability or age.

PERSONAL INFORMATION

NAME _____ EMAIL _____

PHONE _____ ALTERNATE PHONE _____

CURRENT ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP _____

EDUCATION

HIGH SCHOOL (NAME AND LOCATION) _____

AREA OF STUDY _____ YEARS ATTENDED _____

COLLEGE (NAME AND LOCATION) _____

AREA OF STUDY _____ YEARS ATTENDED _____

TRADE, BUSINESS OR GRADUATE SCHOOL (NAME AND LOCATION) _____

AREA OF STUDY _____ YEARS ATTENDED _____

WORK EXPERIENCE

PLEASE LIST YOUR LAST 4 EMPLOYERS STARTING WITH YOUR PRESENT OR LAST EMPLOYER.

DATE MO./YR. _____ NAME & ADDRESS _____ POSITION _____

SUPERVISOR NAME & PHONE _____ REASON FOR LEAVING _____ SALARY _____

DATE MO./YR. _____ NAME & ADDRESS _____ POSITION _____

SUPERVISOR NAME & PHONE _____ REASON FOR LEAVING _____ SALARY _____

DATE MO./YR. _____ NAME & ADDRESS _____ POSITION _____

SUPERVISOR NAME & PHONE _____ REASON FOR LEAVING _____ SALARY _____

DATE MO./YR. _____ NAME & ADDRESS _____ POSITION _____

SUPERVISOR NAME & PHONE _____ REASON FOR LEAVING _____ SALARY _____

ARE YOU PRESENTLY EMPLOYED? YES/NO (CIRCLE) IF YES, MAY WE CONTACT YOUR CURRENT EMPLOYER? YES/NO (CIRCLE)

REFERENCES

PLEASE LIST 3 PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST THREE YEARS.

| NAME & OCCUPATION | PHONE | YEARS KNOWN |
|-------------------|-------|-------------|
| NAME & OCCUPATION | PHONE | YEARS KNOWN |
| NAME & OCCUPATION | PHONE | YEARS KNOWN |

DATE ABLE TO START:

What days and times would you not be able to work?

Are you willing to work overtime? *yes/no (circle)* Do you smoke? *yes/no (circle)*

Have you ever visited Mäni's before? *yes/no (circle)* If yes, please describe your experience

Why would you like to work for Mäni's?

Give a brief example of your innovation/creativity in the workplace.

If driving is a requirement of the position being applied for, do you have a current, valid driver's license?

(if driving is a requirement for the job, continued employment is contingent on your maintaining a current driver's license) *yes /no (circle)*

Are you able, at the time of employment, to submit verification of your legal right to work in the United States?

(verification and completion of the I-9 form must be submitted no later than 3 business days after date of hire) *yes /no (circle)*

If a minor, can you produce the relevant age and work certificate necessary to obtain employment? *yes /no (circle)*

Have you ever applied to work at Mäni's before? *yes /no (circle)* If so, when?

Have you ever been convicted of a felony which is related to the functions or qualifications of the position for which you are applying? *yes /no (circle)*
If so, please describe fully the felony conviction(s), listing the nature of the offense(s) and your rehabilitation since the conviction(s)

APPLICANT'S STATEMENT

In signing this application, I certify that all of the information contained on this form is a complete and accurate statement of the facts and understand that if any misrepresentation, omission, or falsification be discovered, it will constitute grounds for dismissal. I hereby authorize Mäni's to conduct any investigation necessary concerning any part of my background related to the position I am seeking. I release all parties from any liability in connection with the provision and use of such information.

I understand and agree that, if employed by Mäni's, I will abide by it's rules and regulations which I understand are subject to change. I further understand that, if hired, my employment is for no definite period of time and may be terminated by either party at any time.

APPLICANT'S SIGNATURE

DATE