

## APPLICATION FOR EMPLOYMENT

## PLEASE PRINT OR FILL IN PDF FORM AND EMAIL TO MARKETING@TACODELHI.CA FIRST NAME / MIDDLE INITIAL / LAST NAME SIN NUMBER **TODAY'S DATE** CURRENT ADDRESS: STREET APT# PROVINCE **POSTAL CODE** CITY **CELLPHONE EMAIL ADDRESS** FOR WHICH POSITION ARE YOU APPLYING? DATE YOU ARE AVAILABLE FOR EMPLOYMENT? WHAT ARE YOUR EXPECTATIONS FOR WAGE? \$\_\_\_ / HOUR OR \$\_\_\_\_\_ / WEEK YES NO 1. If hired, can you submit documents required to prove your identity and legal eligibility to work in Canada? 2. Are you of legal age to work in this Province? 3. Are you of legal age to serve alcohol in this Province? 4. If hired, can you submit proof of age? 5. How many jobs have you had in the last two years? 6. Have you ever been terminated from a job? 7. You want to work: Part-time (\_\_\_\_\_ hours/week) Full-time (\_\_\_\_hours/week) 8. Do you presently have a job that you intend to keep if hired? 9. Using the table below, please indicate the days you CAN work. List the earliest and latest time you CAN work. Please account for travel time to and from other obligation (e.g., sports, classes, meetings, other employment, etc.). MON TUE WED THU FRI SUN SAT

10. Do you have a reliable means of transportation to and from work for the days and time you are available?

**EARLIEST TIME IN** 

LATEST TIME OUT

YES

11. Are you available to work holidays and weekends?  YES NO								
12. Are you, or do you plan to be, in school or taking courses at any time while working here?  YES NO								
13. Education								
	Name & Location of School		Dates	Last Year Completed	Major/ Specialty De		Degree	
High School								
College / Other								
16. Work History (List your last three jobs):								
ON	Most Rece			Previous Job		Previous Job		
Company Name								
Address								
Position								
Job Duties								
Did you handle cash?								
Name & Title of Direct Supervisor								
Phone Number of Direct Supervisor								
Dates Employed								
Reason for leaving?								
May we contact pre	evious							
17. Personal References (Other than immediate family):								
Name				Phone Number	Rela	tionship	Years Known	
18. If hired, do you agree that you will keep the information of the Company confidential and not disclose such information to any third party?  YES NO								

## PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

I certify that the information that I provide in this Application and in seeking employment is true and complete and that I will update any information that changes.

I understand that false or misleading information given in this Application or during an interview may result in disqualification from consideration for employment or discharge in the event of employment. I authorize Taco Delhi to make such inquiries of me, my references, prior employers, schools and any third party including but not limited to any Government Agency or any court or criminal justice entity to verify and evaluate my qualifications.

I hereby release employers, schools, and other persons, institutions, or business from all liability in responding to inquiries in connection with this Application for Employment. I understand and agree that this Application for Employment does not create a contract for employment or a guarantee of employment.

Franchisees are the exclusive employer of their employees, and such are solely responsible for all employment related matters in their restaurants. Taco Delhi and its independently owned and operated franchisees are equal opportunity employers committed to a diverse and inclusive workforce.

I understand that Taco Delhi may at any time change its personnel policies and may also change my job description, responsibilities, wages, and benefits.

I HEREBY ACKNOWLEDGE ALL THE INFORMATION PROVIDED IS TRUE AND COMPLETE						
SIGNATURE:	DATE:					