	STORE:			ANAGEMENT ONLY: ATE OF PAY:				
CENEDAL.								
GENERAL:								
NAME: (FIRST)								
ADDRESS:								
PHONE #		IF UNDER 18 AGE	: B	IRTHDATE/_	/	MUST BE AT LEA	ST 16	
POSITION APPLYING FOR:		DATE AVAILA	BLE:	HOW DID Y	OU HEAR ABO	UT US?		
DAYS AVAILABLE: SUN	MON	TUE	WED	THURS	FRI	SAT		
HOURS AVAILABLE: SUN	MON	TUE	WED	THURS	FRI	SAT	<del></del>	
REASON FOR APPLYING FOR T	HIS PARTICULAR EMPLOY	/MENT:						
RELATIVES OR FRIENDS EN	IPLOYED BY COOK OU	T:						
NAME:			STORE:		RELATIONSHIP	):		
NAME:								
IN CASE OF AN EMERGENO					•			<del></del>
				CITV		DHONE #		
NAME:								
<u>EDUCATION</u>	<u>NAME</u>		LOCATION		MAJOR	YEARS	COMPLETED	<u>GPA</u>
HIGH SCHOOL						9 10	11 12	
COLLEGE							3 3 _	
OTHER						<del></del>	3 4 _	
US MILITARY						PERIO	D OF DUTY _	
	JIRED TO COMPLETE AN I STUDENT THAT WILL WO						O WORK ELIGIB	ILITY.
EMPLOYMENT HISTORY: (	MOST RECENT FIRST)							
EMPLOYER:	PHON	IE #	SI	JPERVISOR:		TITLE:		
ADDRESS:	CI	TY:	STATE:	ZIPCODE: _				
YOUR POSITION:				SALARY/WAGES	5:			
REASON FOR LEAVING:								
EMPLOYED.	DUON	IF #	CI	IDED/ICOD.		TIT! C.		
EMPLOYER:								
YOUR POSITION:								
REASON FOR LEAVING:					·	<del></del>		
EMPLOYER:	PHON	IE #	SI	JPERVISOR:		TITLE:		
ADDRESS:	CI	TY:	STATE:	ZIPCODE: _				
YOUR POSITION:	MTI	HS/YRS EMPLOYED:		SALARY/WAGES	S:			
REASON FOR LEAVING:								
HAVE YOU EVER WORKED FOR					O			
LOCATION:				REASO	ON FOR LEAVIN	lG:		
*IF YES, FINAL APPROVAL FOI PLEASE READ CAREFULLY. I cer and/or criminal record to provide it to CC any bonus/quarterly bonus if no longer e be "at will." That is, COOK OUT may end receiving earned vacation pay.	tify that all information in this ap OOK OUT upon request. I hereby re employed at date of payout (2) I ag	plication is true and complete ase COOK OUT from all tyree to conform to the rule	ete and there are no r iability whatsoever in s of COOK OUT and to	nisrepresentations. I author n furnishing and using said ir random drug screens when	nformation. If emplo required. Furthermo	yment is obtained under this ore, I understand and agree	s application (1) I agr that if employed the	ee not to receive employment wil
DATE SIGNED: /	/	SIGNAT	URE OF APPLICA	ANT:				