



APPLICATION FOR EMPLOYMENT

Position Applying For: _____ Desired Rate of Pay: _____

Full Legal Name: _____

Address: _____

City: _____ State: CA Zip Code: _____

Home Phone # (____) _____ Best Time to Call: _____

Cell Phone # (____) _____ Best Time to Call: _____

Social Security# _____ - _____ - _____ Date of Birth: _____

(NOT REQUIRED, USED TO DETERMINE AGE TO SERVE ALCOHOL)

WORKING EXPERIENCE:

1. Name of Company _____ Position _____

Address _____

Phone #(____) _____ Manager _____ Rate of Pay _____

From ____ / ____ To ____ / ____ Reason for Leaving _____

2. Name of Company _____ Position _____

Address _____

Phone #(____) _____ Manager _____ Rate of Pay _____

From ____ / ____ To ____ / ____ Reason for Leaving _____

3. Name of Company _____ Position _____

Address _____

Phone #(____) _____ Manager _____ Rate of Pay _____

From ____ / ____ To ____ / ____ Reason for Leaving _____

AVAILABILITY (check one): FULL TIME PART TIME ON-CALL

Below, please checkmark the days you ARE available to be considered for employment:

MON TUES WED THURS FRI SAT SUN

AT-WILL EMPLOYMENT ACKNOWLEDGMENT

I declare that the information I have provided on this application is correct and that any false statements or omissions will justify my rejection or dismissal. I authorize the company to contact any of my previous employers as well any reference source to verify the facts and information I have furnished regarding my qualifications and character. I authorize any person(s) having knowledge to provide such information to the company, and release from liability and agree to hold harmless any person that furnishes such information in good faith.

If employed by the company, I understand that I will be an at will employee and that my employment with Nirvana Specialties, Inc. (the Company”) may be terminated at any time by myself or the Company with or without cause or advance notice. I further understand that if employed by the Company, no representative of the Company other than the Chief Executive Officer of the Company or her designee has any authority to modify or change the at-will nature of my employment and that any such modification must be in writing.

I understand that this is only an application for employment and is not nor shall it be considered an agreement or contract of employment. I agree to arbitrate disputes arising out of the completion of this application, and further understand that a condition of employment with the Company shall be my execution of an arbitration agreement providing for the arbitration of all disputes.

Can you work legally in the USA? (check one): YES NO

Today's Date: ____ / ____ / ____ Signature _____

For Official Use Only:

#DEP _____ Start Date _____ Status _____ Position _____ Salary _____