JOB APPLICATION

Pecina's Mexican Cafe 1711 E Main St, Weatherford, Oklahoma 73096 580-772-2329

Pecina's Mexican Cafe is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Address: City, State and Zip Code:													
Telephone Number:	C 20 17												
Email Address:													
Date of Application:													
Employment Position Position(s) applying for: Server (part time)													
residents applying for certer (part and)													
How did you hear about this position?													
What days are you available for work? What hours or shift are you available for work? On what date can you start working if you are hired? Do you have reliable transportation to and from work?													
							Personal Information						
							Have you ever applied to or worked for Pecina's Mexican Cafe before? Yes						
							If yes, when?						
Do you have any friends, relatives, or acquaintances working for Pecina's Mexican Cafe Yes If yes, state name & relationship:	No												
Are you 18 years of age or older?	No												
Are you a U.S. citizen or approved to work in the United States?	No												
What document can you provide as proof of citizenship or legal status?													

Job Skills/Qualifications Please list below the skills and qualifications you possess for the position for which you are applying:					
Note: Pecina's Mexican Ca	fe complies with the ADA and ssary for eligible applicants/e	l considers reasonable mployees to perform es	accommodation ssential functions.)		
Education and Training					
High School			Dawas Famod		
Name	Location (City, State)	Year Graduated	Degree Earned		
College/University					
Name	Location (City, State)	Year Graduated	Degree Earned		
Vocational School/Specia	lized Training	- MAN 100 HOUR			
Name	Location (City, State)	Year Graduated	Degree Earned		
Military:					
Are you a member of the A	Armed Services?				
What branch of the military					
What was your military ran	0 259				
How many years did you s					
₩ W	possess that would be an as				
What military skins do you	possess that would be an as-	oct for this position.			
	4				
Previous Employment					
Employer Name:					
Job Title:					
Supervisor Name: Employer Address:					
City, State and Zip Code:					
Employer Telephone:					
Dates Employed:	Access to the control of the control				
Reason for leaving:					

Employer Name:		
Job Title: Supervisor Name: Employer Address: City, State and Zip Code: Employer Telephone: Dates Employed: Reason for leaving:		
Employer Name: Job Title: Supervisor Name: Employer Address: City, State and Zip Code: Employer Telephone: Dates Employed: Reason for leaving: References Please provide 1 personal and profes	ssional reference	ce(s) below:
Reference		Contact Information
This means that your employment of with or without notice, by you or the Cafe has authority to enter into relationship. You understand that you written statements or representations.	can be terminate e Pecina's Mex any agreemen ur employment ns regarding ye ent signed by	exican Cafe is referred to as "employment at will." ed at any time for any reason, with or without cause, cican Cafe. No representative of Pecina's Mexican t contrary to the foregoing "employment at will" is "at will," and that you acknowledge that no oral or our employment can alter your at-will employment you and either our Executive Vice-President/Chief
Applicant Signature:		Dated:
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