



# AZ PHO & GRILL

## EMPLOYMENT APPLICATION

Please mark the location you're applying for:

LOCATION 1 - CHANDLER  
3140 S. GILBERT RD., STE. #1  
CHANDLER, AZ 85286  
(480) 802-5356  
Email: azphogrill@gmail.com

LOCATION 2 - GILBERT  
1674 N. HIGLEY RD., STE. #104  
GILBERT, AZ 85234  
(480) 219-3997  
Email: azpgrimesa@gmail.com

LOCATION 3 - CHANDLER  
885 N. 54TH ST., STE. #5  
CHANDLER, AZ 85226  
(480) 825-7767  
Email: azpgray@gmail.com

AVAILABLE FOR  
ALL LOCATIONS

### APPLICANT INFORMATION

Today's Date										
Last Name			First Name				Middle Name			
Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>	Single <input type="checkbox"/>	Married <input type="checkbox"/>	Divorced <input type="checkbox"/>	SSN (Optional)			
Street Address							Apartment/Unit #			
City				State			ZIP			
Phone				E-mail Address						
Date Available		Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Mon <input type="checkbox"/> AM/PM	Tue <input type="checkbox"/> AM/PM	Wed <input type="checkbox"/> AM/PM	Thu <input type="checkbox"/> AM/PM	Fri <input type="checkbox"/> AM/PM	Sat <input type="checkbox"/> AM/PM	Sun <input type="checkbox"/> AM/PM
Position Applied for						Desired Salary				
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you willing to take pre-employment drug test if required?		YES <input type="checkbox"/>	NO <input type="checkbox"/>							
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain						

### EDUCATION

High School		Address		
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
College		Address		
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	

### EMERGENCY CONTACTS

Please list three emergency contacts

Full Name		Relationship	
Address		Phone	
Full Name		Relationship	
Address		Phone	
Full Name		Relationship	
Address		Phone	

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result to my separation.

Signature	Date
-----------	------