



APPLICATION FOR EMPLOYMENT

The Indigo Road Restaurant Group is an equal opportunity employer. We will not discriminate against employees or applicants for employment on any basis prohibited by federal, state or local laws, including but not limited to race, color, sex, ancestry, age, national origin, religion, mental or physical disability, marital status, sexual orientation, genetic information or any protected veteran status.

**** PLEASE PRINT CLEARLY ****

Please specify which Indigo Road Restaurant location you are applying for: _____

Position(s) applying for: _____ Today's Date ____/____/____

Desired salary: _____

How did you find out about this job? Employee Referral _____ Walk-in Advertisement: _____ Other: _____

Why are you seeking a new job at this time? _____

Applicant Information

First Name _____ Middle _____ Last _____

Street Address _____ Social Security No. _____

City/State/Zip _____ Phone (____) _____

If hired, do you have a reliable means of transportation to get to work? _____ Describe _____

Are you at least 18 years old? _____ If you are under 18 years of age, can you furnish a work permit? _____

Are you legally eligible for employment in the U.S.? _____ (If you are hired, E-Verify will be used to determine your eligibility to work in the United States of America.)

Have you been convicted of a serious misdemeanor or felony? Yes No If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

If the job you are applying for requires driving: Driver's License No. _____ State _____ Expiration Date _____

Are you a veteran? _____ If yes, give dates of service: From _____ To _____

List any special skills or training: _____

Employment Information

Are you seeking full time, part time or temporary employment? _____

What hours and shift(s) would you prefer to work? _____

List times you are **NOT** available to work? _____

Are you willing to work overtime? _____ Weekends? _____ Holidays? _____

Are you currently employed? _____ If yes, please state who your current employer is: _____

If hired, when would you be able to start? _____

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Have you ever worked for this organization before? _____ If yes, state the name you used: _____

List any friends or relatives employed by this company: _____

Have you ever been discharged or asked to resign from any position? If yes, please describe: _____

If applicable, please refer to the attached job description for the position for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: _____

Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8 Secondary: 9 10 11 12 G.E.D

College: 1 2 3 4 5 6 7 8

Name of School: _____ Name of School: _____

Name of School: _____

Location of School: _____ Location of School: _____

Location of School: _____

If in high school, are you enrolled in a recognized co-op program? Yes No

Degree & Major: _____

If yes, identify program and school: _____

Minor: _____

Work History (please begin with most recent)

1. Company _____ Phone No. with Area Code () _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

2. Company _____ Phone No. with Area Code () _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____

3. Company _____ Phone No. with Area Code () _____

Address _____ City/State/Zip _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____

Job Title _____ Supervisor's Name & Title _____

Describe duties briefly: _____

Specific reason for leaving: _____



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For references purposes: Have you worked for any of these organizations or attended school under a different name? If yes, give name and organization(s) _____

May we contact the employers listed above? If not, list the employers you do not wish us to contact and why:

Authorizations & At-Will Employment Agreement

(Please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a serious misdemeanor or felony while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature _____ Date _____

Name (please print) _____

NOTE: The name Indigo Road in this document refers to The Indigo Road Group, and also includes its affiliates: The Oak Charleston, LLC; O-Ku, LLC; Indaco, LLC; The Macintosh, LLC; The Cocktail Club, LLC; The Oak Table, LLC; The Oak Atlanta, LLC; Colletta, LLC; O-Ku Atlanta, LLC; Mercantile and Mash, LLC; Town Hall, LLC; Enlightened Hospitality LLC, and Indigo Road or IR Management LLC. It is also sometimes referred to as "the Company"

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