

CONTACT INFO: INFO@NOMNOMASIANGRILL.COM

LOC NGUYEN: 303.5231547

DI	FRS	VINC	LIN	EOR	ΝΛ	TION
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Last Name		First Name	M.I.
Address		City, State, Zip Co	ode
Primary Phone		Alternate Phone	!
Email		Date of Applica	tion
Social Security Number			
EMERGENCY CONTACT			
Last Name		First Name	M.I.
Address		City, State, Zip Co	
Phone		,, , , ,	
POSITION			
Position Applied For			
Employment Desired	Full Time 🗆	Part Time □	Seasonal/Temporary □
Date Available			

SHIFT AVAILABILITY

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
То							
Overnights?							
Yes or No							



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EDUCATION

	School Name/Location	Diploma/Degree	Major/Area of Study
High School			
College/University			
Trade School			
Other Education			

PREVIOUS EMPLOYMENT

Company:	Job Title:	Phone:
Address		Dates of Employment:
Company:	Job Title:	Phone:
Address		Dates of Employment:
Company:	Job Title:	Phone:
Address		Dates of Employment:
Company:	Job Title:	Phone:
Address		Dates of Employment:



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PLEASE LIST ANY RELEVANT SKILLS, SPECIAL INTERESTS, TRAINING AND MEMBERSHIPS					
REFERENCES					
Name:	Occupation:	Phone:			
Name:	Occupation:	Phone:			
Name:	Occupation:	Phone:			
FOR OFFICE USE ONLY					
INTERVIEW OR REFERENCE CO	DMMENTS:				



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VOLUNTARY INFORMATION

This information is being requested in accordance with federal regulations.

Racial or	America	n Indian/Alaskan 🗆	Asian/Pacific Islander \square		African An	African American/Black \square	
Ethnic Group		Hispanic/Latino □	l White	White/Caucasian \Box		Other 🗆	
Gender	Male □	Female □					
Military Service	e Pre	-Vietnam Era □	Vietnam Era □	Post-Vietnam	Era 🗆 Di	sabled Veteran 🗆	
How did you he	ear	Newspaper [□ Compa	ny Employee □	Professio	nal Publication 🗆	
about us?		Job Fair l	□ Plac	ement Office 🗆		Website □	
		Other □			_		