

Employment Application

816-501-9067

Acrobat Outsourcing is an equal opportunity employer dedicated to non-discrimination in all employment practices. Acrobat Outsourcing selects the best qualified individual for the job based on job-related qualifications regardless of race, age (40+), color, religion, gender, national origin, ancestry, marital status, sexual orientation, disability or any other status protected by applicable law.

PLEASE PRINT

Full Name Thomas Horton Date: 10-6-16
 Home Telephone (510) 350-6486 Other Telephone (510) 350-6486
 Present Address 5111 Telegraph AVE #153 Oak Ca 94609
 Permanent Address, if different from present address: Same
 Email Address For the love of horton @ Gmail.com

EMPLOYMENT DESIRED

Position applying for: Chef Salary desired: 25hr
 Are you currently registered with any staffing and/or employment agencies? If so, please list
NO

Are you applying for: Full-time work? Yes No Part-time work? Yes No
 Temporary work, e.g., summer or holiday work? Yes No From: _____ To: _____
 How did you find out about our open position? (Please check fill in proper name of source):
 Referral Name of Referral _____ Newspaper Job Fair Agency Company Website
 Other Web Posting Other Source
 Could you work overtime, if necessary? Yes No If hired, on what date could you start working? _____

Please keep in mind that schedules and shifts may vary depending on position and season. Additionally, the hours may vary from week to week, depending on the company needs. Please list only the times/days you're available to work below.

SPECIFY HOURS AVAILABLE DAILY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM		Open	Open	Open	Open	Open	Open
PM		Open	Open	Open	Open	Open	Open

Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates: _____

PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes No If yes, when? _____
 Do you have friends or relatives working for Acrobat Outsourcing? Yes No If yes, please state name and relationship _____
 If hired, would you have a reliable means of transportation to and from work? Yes No
 If hired, can you present evidence of your legal right to live and work in this country? Yes No
 State age if you are under 18 _____. If you are under 18, hire is subject to verification that you are of minimum legal age to work.
 Are you able to perform the essential functions of the job for which you are applying? Yes No

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outsourcing

Your Hospitality Staffing Professionals

If no, describe the functions that cannot be performed. (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.) _____

Pursuant to the San Francisco Fair Chance Ordinance, we will consider for employment qualified applicants with arrest and conviction records.

EDUCATION & SKILLS

NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU GRADUATE?
Sullivan College	Louisville Ky	Cert	Yes
Dot L	Louisville Ky	3 yrs	NO
Do you have any special licenses, certificates or special training? If so please list under "Special".		YES	NO
Are you computer literate? If so, list software knowledge under "Special."		YES	NO
Are you proficient with Point of Sales Systems? If, so please list which ones under "Special."		YES	NO
Do you have any other experience, training, qualifications or special skills, which you feel make you especially suited for work at Acrobat Outsourcing? If so, please list under "Special."		YES	NO
Special:	Culinary Arts		

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for unemployment periods of three months or more.

Are you currently employed? Yes ___ No If so, may we contact your current employer? Yes ___ No ___

Name and Address of Employer Clarion Hotel Concord

Type of Business Hotel Telephone No. (510) 725-8221 Supervisor's Name Baraka

Your Position and Duties Exec Chef, manage all Back of the operation

Dates of Employment: From 4/15 To 3/16 Weekly Pay: Starting 65,000.00 Ending Same

Reason for Leaving: Advancement

Name and Address of Employer Donatello Hotel / Zingeri Ristorante

Type of Business Hotel Telephone No. () Supervisor's Name Krishna

Your Position and Duties Exec Chef

Dates of Employment: From 1/11 To 2/15 Weekly Pay: Starting 45,000.00 Ending 75,000.00

Reason for Leaving: Change of place

Name and Address of Employer _____

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Your Hospitality Staffing Professionals

Type of Business _____ Telephone No. (____) _____ Supervisor's Name _____

Your Position and Duties _____

Dates of Employment: From _____ To _____ Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Name and Address of Employer _____

Type of Business _____ Telephone No. (____) _____ Supervisor's Name _____

Your Position and Duties _____

Dates of Employment: From _____ To _____ Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Have you ever been fired from any previous place of employment? If so, please explain: _____

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military? Yes No

If so, describe: Culinary Arts

JOB RELATED REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: Jon R Telephone No. (925) 301-6270

Address: Moraga Ca

Occupation: Chef Relationship: Friend Number of Years Acquainted: 11

Name: Arnold Palido Telephone No. (202) 567-1093

Address: _____

Occupation: Chef Relationship: Friend Number of Years Acquainted: 20+

Name: Jowhari Trahan Telephone No. (510) 606-2353

Address: Oakland Ca

Occupation: _____ Relationship: Friend Number of Years Acquainted: 4

Please Read Carefully, Initial Each Paragraph and Sign Below

IVH

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

IVH

I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

IVH

I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.

IVH

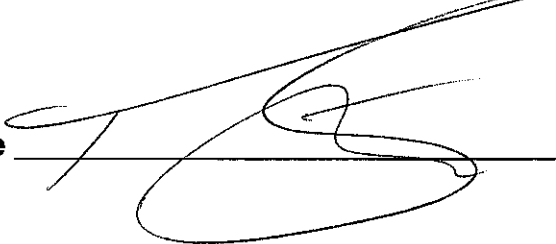
I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.

IVH

Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I hereby acknowledge that I have read and understand the above statements.

Applicant's Signature



Date

10-6-12

NOTICE TO EMPLOYEE
Labor Code section 2810.5

EMPLOYEE

Employee Name: Thomas Horton
Start Date: 10/6/16

EMPLOYER

Legal Name of Hiring Employer: S.E Scher

Is hiring employer a staffing agency/business (e.g., Temporary Services Agency, Employee Leasing Company; or Professional Employer Organization [PEO])? Yes No

Other Names Hiring Employer is "doing business as" (if applicable):

Acrobat Outsourcing

Physical Address of Hiring Employer's Main Office:

665 Third St. Suite 415, San Francisco, CA. 94107

Hiring Employer's Mailing Address (if different than above):

Hiring Employer's Telephone Number: 415-431-8826

If the hiring employer is a staffing agency/business (above box checked "Yes"), the following is the other entity for whom this employee will perform work:

Name: _____

Physical Address of Main Office: _____

Mailing Address: _____

Telephone Number: _____

Rate(s) of Pay: 16/h Overtime Rate(s) of Pay: 1.5x

Rate by (check box): Hour Shift Day Week Salary Piece rate Commission

Other (provide specifics): _____

Does a written agreement exist providing the rate(s) of pay? (check box) Yes No

If yes, are all rate(s) of pay and bases thereof contained in that written agreement? Yes No

Allowances, if any, claimed as part of minimum wage (including meal or lodging allowances):

(If the employee has signed the acknowledgment of receipt below, it does not constitute a "voluntary written agreement" as required under the law between the employer and employee in order to credit any meals or lodging against the minimum wage. Any such voluntary written agreement must be evidenced by a separate document.)

Regular Payday: FRIDAY

Insurance Carrier's Name: Integro USA Inc. dba Integro Insurance Brokers

Address: 1 State Street Plaza, 9th floor, New York, NY. 10004

Telephone Number: 212-295-5440

Policy No.: LDC4042609 AOS

Self-Insured (Labor Code 3700) and Certificate Number for Consent to Self-Insure: _____

Unless exempt, the employee identified on this notice is entitled to minimum requirements for paid sick leave under state law which provides that an employee:

- a. May accrue paid sick leave and may request and use up to 3 days or 24 hours of accrued paid sick leave per year;
- b. May not be terminated or retaliated against for using or requesting the use of accrued paid sick leave; and
- c. Has the right to file a complaint against an employer who retaliates or discriminates against an employee for
 1. requesting or using accrued sick days;
 2. attempting to exercise the right to use accrued paid sick days;
 3. filing a complaint or alleging a violation of Article 1.5 section 245 et seq. of the California Labor Code;
 4. cooperating in an investigation or prosecution of an alleged violation of this Article or opposing any policy or practice or act that is prohibited by Article 1.5 section 245 et seq. of the California Labor Code.

The following applies to the employee identified on this notice: (Check one box)

1. Accrues paid sick leave only pursuant to the minimum requirements stated in Labor Code §245 et seq. with no other employer policy providing additional or different terms for accrual and use of paid sick leave.
2. Accrues paid sick leave pursuant to the employer's policy which satisfies or exceeds the accrual, carryover, and use requirements of Labor Code §246.
3. Employer provides no less than 24 hours (or 3 days) of paid sick leave at the beginning of each 12-month period.
4. The employee is exempt from paid sick leave protection by Labor Code §245.5. (State exemption and specific subsection for exemption): _____

Janet Goodman
(PRINT NAME of Employer representative)

[Signature]
(SIGNATURE of Employer Representative)

(Date)

10/6/16

Thomas Horton
(PRINT NAME of Employee)

[Signature]
(SIGNATURE of Employee)

(Date)

10-6-16

The employee's signature on this notice merely constitutes acknowledgement of receipt.

Labor Code section 2810.5(b) requires that the employer notify you in writing of any changes to the information set forth in this Notice within seven calendar days after the time of the changes, unless one of the following applies: (a) All changes are reflected on a timely wage statement furnished in accordance with Labor Code section 226; (b) Notice of all changes is provided in another writing required by law within seven days of the changes.

Interview Note Sheet

Applicant Information	
Name: <u>Thomas Horton</u>	Interviewer: <u>Jefferson</u>
Date: <u>10/6/15</u>	Rate of Pay: 160 <u>160</u>
Position (s) Applied for: <u>chef</u>	Referred by:

Test Scores					
Server	/35	%	Bartender	/30	%
Prep Cook	/15	%	Barista	/10	%
Grill Cook	/40	<u>75</u> %	Cashier	/10	%
Dishwasher	/10	%	Housekeeping	/16	%

Seeking:

Full-Time

Part-Time

Relevant Experience & Summary of Strengths

Total of 300 in Food Service/Hospitality

- 96 in Bay Area
- Restaurant foods -
- EC Concord Hotel
- Flexible, willing to work
- Looking for Weekdays -

P.O.S. Experience: Y / N details: _____

Transportation

Car
 Public Transit
 Carpool (Rider / Driver)

Regions Available to work:

SF City
 SF North
 SF Peninsula
 East Bay
 Outer East Bay

San Jose South San Jose SJ Peninsula

Certifications (if any)

TIPS
 Serv-Safe 5 year
 LEAD
 Other _____
 Will Submit

Availability

Open
 AM only
 PM only
 Weekdays only
 Weekends only

Details: No Sunday Preferred available 2nd Sunday & month

Uniforms Owned:

Bistro
 Black Bistro
 Tuxedo
 1/2 Tuxedo
 Black Vest
 Long Black Tie

Chef Coat
 Chef Pants
 Knives
 Black Pants
 Non-Slip Shoes
 Bow Tie
 Other: _____

Would you recommend this applicant for Acrobat Academy?	Convention Candidate?	Other Languages Spoken:
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