



Employment Application

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.

Full Name Milton S. Williams Date: 11.27.2019
Home Telephone (415) 710.1785 Other Telephone (____)
Present Address P.O. Box 475783
Permanent Address, if different from present address: _____
Email Address intheflow405@gmail.com

Position applying for: Dishwasher/Utility/Server/Vegan Chef Salary desired: \$18/hr.
Are you currently registered with any staffing and/or employment agencies? If so, please list _____

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?
11.28.2019

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.

<u>SPECIFY HOURS AVAILABLE DAILY</u>	<u>SUNDAY</u>	<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>	<u>SATURDAY</u>
AM	<u>7am</u>	<u>7am</u>	<u>7am</u>	<u>7am</u>	<u>7am</u>	<u>7am</u>	<u>7am</u>
PM	<u>9pm</u>	<u>9pm</u>	<u>9pm</u>	<u>9pm</u>	<u>9pm</u>	<u>9pm</u>	<u>9pm</u>

Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates:
No

PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes No If yes, when? April 7, 2017 and intervals after one year.

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

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 any and all Fair Chance Ordinances, 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?
<u>Banman College</u>	<u>Berkeley, CA</u>	<u>Natural Chef (vegan)</u>	<u>No</u>
Do you have any special licenses, certificates or special training? If so please list under "Special".		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Are you computer literate? If so, list software knowledge under "Special."		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Are you proficient with Point of Sales Systems? If so please list which ones under "Special."		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> 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."		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Special: ServSafe Food Protection Manager; Microsoft, Apple IOS; Highly organized, professional, meticulous, eye for design

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 Manifest, LLC San Francisco, CA
Vegan Culinary Telephone No. (415) 710.1785 Supervisor's Name Self-Employment
Type of Business Culinary Your Position and Duties Preparing to pitch business plan for
Start-up funding, after which Private Chef (seasonal retreats)
Catering and the service components
Dates of Employment: From 11-18-2018 To Present

Reason for Leaving: _____

Name and Address of Employer Williams-Sonoma, Inc.

Type of Business Retail Telephone No. (415) _____ Supervisor's Name Paul Bender
Your Position and Duties Culinary Specialist with emphasis on maintaining the
Culinary Activities program; prepared holiday food samples and beverages
by using and demonstrating store brand appliances
Dates of Employment: From Oct. 2018 To Dec. 2018

Reason for Leaving: Determined not a good fit for growth; resigned to pursue
entrepreneurial goals

Name and Address of Employer _____

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

Your Position and Duties _____

Dates of Employment: From _____ To _____

Reason for Leaving: _____

Name and Address of Employer _____

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

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The Service Companies

Your Position and Duties _____

Dates of Employment: From _____ To _____

Reason for Leaving: _____

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

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

If so, describe: _____

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

Name: Bernice Welles Telephone No. (45) 271.3222

Address 3443 Clay Street

Occupation: Partner @ IPF Partners Relationship: Close Friend Number of Years Acquainted: 9

Name: Scherell Kemp and Griffin Gaffney Telephone No. (904) 924-4545 Address 503.319.3725

~~San Francisco~~ Address 4350 Trenton Drive North Jacksonville, FL 32209

Occupation: Humu Relationship: Friend Number of Years Acquainted: Lifetime

Name: Connie Poole Telephone No. (628) 233.4418 Address Oakland, CA

Occupation: Chef @ Stripe Relationship: Friend / Former Co-worker Number of Years Acquainted: 2+

Please Read Carefully, Initial Each Paragraph and Sign Below

M
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.

M
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.

M
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.

M
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.

M
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

Walter A. Williams

Date 11.27.2019

NOTICE TO EMPLOYEE
Labor Code section 2810.5

Employee Name: Williams, Milton

Start Date: 11/27/19

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:

303 Hegenberger Road Suite 300, Oakland, CA. 94621

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: Busser \$ 14 Server \$ 14 Overtime Rate(s) of Pay: \$24

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): _____

Sarah Magnu

(PRINT NAME of Employer representative)

SJ

(SIGNATURE of Employer Representative)

11/27/19

(Date)

Milton S. Williams

(PRINT NAME of Employee)

Milton S. Williams

(SIGNATURE of Employee)

November 27, 2019

(Date)

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.

90%

C 1) After washing your hands, which item should be used to dry them?

- a) Clean apron
- b) Sanitized wiping cloth
- c) Single use paper towel
- d) Common used cloth

C 2) While washing dishes by hand, which item should you wear?

- a) Cutting glove
- b) Oven Mitt
- c) Rubber glove
- d) Nothing

d 3) When should you wash your hands?

- a) Before you start work
- b) After handling non-food items (garbage, money, cleaning chemicals)
- c) After using the restroom
- d) All of the above

b 4) If you need to move a heavy load, you should PULL and not PUSH the object.

- a) True
- b) False

e 5) Which of the following could you be at risk for getting burned from?

- a) Steam from boiling pots
- b) Hot liquids (coffee, soup, tea)
- c) Hot equipment (ovens, pots, chafing dishes)
- d) Harsh chemicals
- e) All of the above

Q 6) All work-related injuries, accidents or illnesses should be reported immediately to the supervisor on duty.

- a) True
- b) False

C 7) What should you do if you spill liquids or see a liquid spill?

- a) Leave it for someone else to clean-up
- b) Wait until the end of your shift to clean it
- c) Flag the spill and clean it immediately
- d) Not sure

C 8) When handling hot items you should?

- a) Wear rubber gloves
- b) No need to wear anything
- c) Use an oven mitt or dry cloth towel
- d) Nothing

a 9) If you are using a three-compartment sink for cleaning and sanitizing, the second sink is used for?

- a) Rinsing
- b) Scraping
- c) Washing
- d) Sanitizing

d 10) What is the proper method for cleaning and sanitizing stationary equipment?

- a) Spray with a strong cleaning solution and wipe with a sanitized cloth
- b) Spray with a sanitizing solution, then rinse with clean water and dry
- c) Wash and rinse, then wipe or spray with a chemical-sanitizing solution
- d) Brush off loose soil with a clean cloth, then wipe with a sanitizing solution

83%

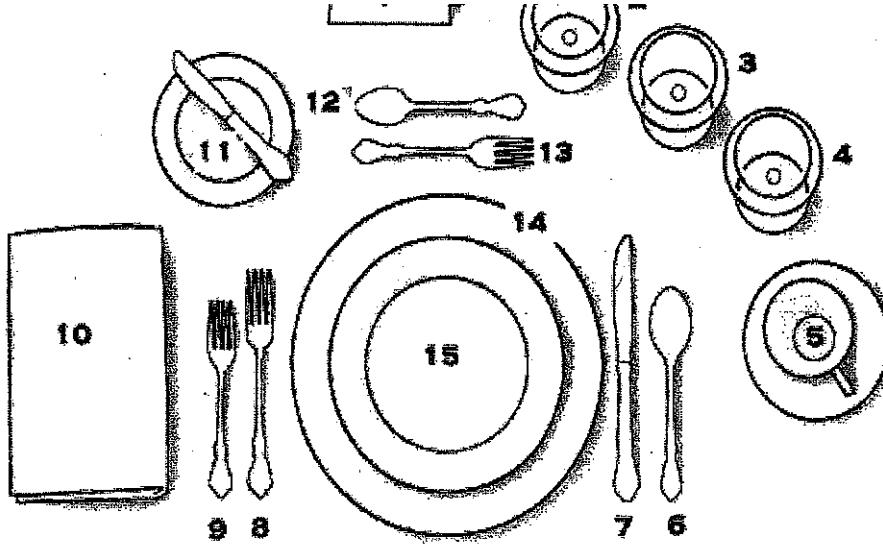
Multiple Choice

- a 1) Food is served on what side with what hand?
 a) On the left side with the left hand
 b) On the left side with the right hand
 c) On the right side with the left hand
 d) On the right side with the right hand
- d 2) Drinks are served on what side with what hand?
 a) On the left side with the left hand
 b) On the left side with the right hand
 c) On the right side with the left hand
 d) On the right side with the right hand
- a 3) Food and drinks are removed on what side with what hand?
 a) On the left side with the left hand
 b) On the left side with the right hand
 c) On the right side with the left hand
 d) On the right side with the right hand
- a 4) What part of a glass should you handle at all times?
 a) The stem
 b) The widest part of the glass
 c) The top
- d 5) When you are setting a dining room how should you set up your tablecloths?
 a) Neatly and evenly across the tables
 b) The creases should all be going in the same directions
 c) The chairs should be centered and gently touching the table cloth
 d) All of the above
- d 6) If you bring the wrong entrée to a guest what should you do?
 a) Go back into the kitchen and patiently wait in line behind the rest of the servers until it's your turn
 b) Inform the guests that you will bring the correct entrée once everyone else in the dinning room is served
 c) Try to convince the guests to eat what you brought them
 d) Go back into the kitchen to the front of the line and inform the expeditor that you need a different entrée

Match the Correct Vocabulary

- D Scullery
- E Queen Mary
- A Chaffing Dish
- G French Passing
- B Russian Service
- F Corkscrew
- C Tray Jack

- A Metal buffet device used to keep food warm by heating it over warmed water
- B Style of service where food is prepared or served individually at the dinner table to fit the customer's specific taste (i.e. providing dressing and pepper for salad or handing out bread to each patron)
- C Used to hold a large tray on the dining floor
- D Area for dirty dishware and glasses
- E Large metal shelving unit for prepared food to be held or for dirty trays to be stored
- F Used to open bottles of wine
- G Style of dining in which the courses come out one at a time



Score / 35

Match the Number to the
Correct Vocabulary

<u>8</u>	Dinner Fork
<u>5</u>	Tea or Coffee Cup and Saucer
<u>7</u>	Dinner Knife
<u>2</u>	Wine Glass (Red)
<u>9</u>	Salad Fork
<u>14</u>	Service-Plate
<u>3</u>	Wine Glass (White)

10 Napkin
11 Bread Plate and Knife
1 Name Place Card
12 Teaspoon
13 Dessert Fork
6 Soup Spoon
15 Salad Plate
4 Water Glass

Fill in the Blank

1. The utensils are placed two inch (es) from the edge of the table.
2. Coffee and Tea service should be accompanied by what extras? cream, sugar, honey.
3. Synchronized service is when: Serving team works in rhythmic, smooth, and choreographed manner.
4. What is generally indicated on the name placard other than the name? Dietary Note.
5. The Protein on a plate is typically served at what hour on the clock? 6.
6. If a guest asks for a specialty dinner (i.e. Gluten-Free or Vegetarian) you should do what immediately?
Present those menu options if available or confer with the chef for customized accommodation.