

ACROBAT OUTSOURCING
TSC GROUP

LW Johnson

Taborca ID: 49064

Date of Hire: / /

Date of Re-Act: 9/13/19

- | | |
|---|---|
| <input type="checkbox"/> E-verify | <input type="checkbox"/> New Hire List (All fields) |
| <input type="checkbox"/> Hire Right EE | <input type="checkbox"/> Check Taborca Profile (All fields) |
| <input type="checkbox"/> Hire Right Internal (upload any list A docs) | <input type="checkbox"/> Upload Resume and Skills Tests (one doc) |
| <input type="checkbox"/> Notice to Employee Completed | <input type="checkbox"/> Upload Food Handler's Card |
| <input type="checkbox"/> Added to Orientation Time Sheet | <input type="checkbox"/> Presented |
| <input type="checkbox"/> Background Check | <input type="checkbox"/> Emailed |

Re Act employee set up (See Re Act Process for more detail)

- ☐ File and I9 pulled (new one created/done in Hire Right if old ones are gone)
- ☐ Re-Act onboarding
- ☐ Check for skills tests, app, FHC, and resume (get new app, new resume if hired more than 1 year ago)
- ☐ Complete Notice to Employee with updated pay if necessary
- ☐ Verify pay option
- ☐ Run new BGC if more than 1 year since last shift worked
- ☐ New orientation/place on time sheet if it's been over a year since last shift
- ☐ New Hire List it's been over a year since last shift
- ☐ Delete employee from the INA/TER spreadsheet if they are on it

Interview Note Sheet

Name: <u>LW Johnson</u>	Interviewer: <u>McKenna</u>
Date: <u>9-13-19</u>	Rate of Pay: <u>\$19.00</u>
Position (s) Applied for: <u>Levi Stadium</u>	Referred by: <u>Victor mullholand</u>

Server	/35	%	Bartender	/35	%
Prep Cook	/20	%	Barista	/15	%
Grill Cook	/40	%	Cashier	/15	%
Dishwasher	/10	%	Housekeeping	/14	%

Seeking:
Full-Time
<u>Part-Time</u>

Re Act

Total of _____ in Food Service/Hospitality

- * Levi Stadium only
- * Was inactivated due to not working in 3 months
- * Carpools w/ Victor Mullholand

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

Car	Public Transit	<u>Carpool</u> (<u>Rider</u> / Driver)
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<u>Levi Stadium</u>

TIPS	Serv-Safe	LEAD	Other	<u>Will Submit</u>
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Open	AM only	PM only	Weekdays only	Weekends only
Details: <u>Levi only</u>				

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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NOTICE TO EMPLOYEE*Labor Code section 2810.5***EMPLOYEE**Employee Name: LW JohnsonStart Date: 9/13/2019**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: Acrobat OutsourcingPhysical Address of Main Office: 1871 The Alameda Ste 110 San Jose, CA 95126Mailing Address: 1871 The Alameda Ste 110 San Jose, CA 95126Telephone Number: (408) 844-0772**WAGE INFORMATION**Rate(s) of Pay: \$19/hr Overtime Rate(s) of Pay: \$28.5/hrRate 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 ☐ NoIf 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

WORKERS' COMPENSATION

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: _____

PAID SICK LEAVE

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): _____

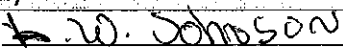
ACKNOWLEDGEMENT OF RECEIPT

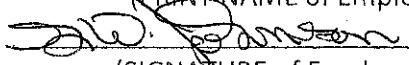
(Optional)


(PRINT NAME of Employer representative)


(SIGNATURE of Employer Representative)

9/13/2019
(Date)


(PRINT NAME of Employee)


(SIGNATURE of Employee)

09-13-2019
(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:



Name: L.W. Johnson

Taborca ID: 49064

Date of Hire: 10/15/18

Date of Re-Act: / /

New employee set up

- | | |
|--|--|
| <ul style="list-style-type: none">○ E-verify○ Hire Right EE○ Hire Right Internal (upload any list A docs)○ Direct Deposit (Scan to Payroll) and/or Global Cash Card – complete the form & have EE sign○ Notice to Employee Completed | <ul style="list-style-type: none">○ Added to Orientation Time Sheet○ Attended New Hire Orientation○ Background Check (Asurint)○ New Hire List (All fields)○ Check Taborca Profile (All fields)○ Upload Resume and Skills Tests (one doc)○ Upload Food Handler's Card |
|--|--|

Re Act employee set up (See Re Act Process for more detail)

- File and I9 pulled (new one created/done in Hire Right if old ones are gone)
- Re Act onboarding if initially hired before 1/1/16
- Check W4
- Check all demographic info and availability
- Check for skills tests, app, FHC, and resume (get new app, new resume if hired more than 1 year ago)
- Complete Notice to Employee with updated pay if necessary
- Verify pay option and take steps to Re Act any old pay options still current
- Run new BGC if more than 1 year since last shift worked
- New orientation/place on time sheet if it's been over a year since last shift
- New Hire List (all fields)
- Delete employee from the INA/TER spreadsheet if they are on it

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.

PLEASE PRINT

Full Name W. Johnson Date: 10-25-18
Home Telephone (916) 546-0881 Other Telephone () _____
Present Address 239 S. 7th Street
Permanent Address, if different from present address: _____
Email Address wjohnson86@yahoo.com

EMPLOYMENT DESIRED

Position applying for: Dishwasher Salary desired: _____

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 Victor 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	7:00am	OPEN	7:00am	7:00am	7:00am	7:00am	7:00am
PM	2:00pm		2:00pm	2:00pm	2:00pm	2:00pm	2:00pm

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

10-25-18

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

Victor

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 _____

Acrobat

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?
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: _____			

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 M. ASIAN FUSION

Type of Business Restaurant Telephone No. (916) 466-9171 Supervisor's Name _____

Your Position and Duties wash dish

Dates of Employment: From 10-13-2010 To 11-14-2011 Weekly Pay: Starting 13.50 hr Ending _____

Reason for Leaving: MOVED

Name and Address of Employer DATA COW SECURITY 99240 BUSINESS PARK DR

Type of Business Security Telephone No. (916) 666-9171 Supervisor's Name DEANIS

Your Position and Duties SECURITY OFFICER, SECURITY FOR STATE BUILDINGS

Dates of Employment: From 11-13 To 11-14 Weekly Pay: Starting _____ Ending _____

Reason for Leaving: DATA TIME TEMP. MOVED

Name and Address of Employer 7272 17th STREET

DEBS FAMILY HOME

~~Room 2 BOARD~~
~~HOUSE~~
~~BOARD 2 CARE~~

Acrobat

outsourcing
Your Hospitality Staffing Professionals

Type of Business

Telephone No.

(916) 395-3510

Supervisor's Name

Barbara Debbs

Your Position and Duties

House keep

Did meals, Passed out meals

Dates of Employment: From 11-13 To 11-14

Weekly Pay: Starting 300.00 month Ending

Reason for Leaving: Part time temp

Name and Address of Employer

M.I.T.E.E. Enterprises 3640 myrtle ave

Type of Business

Room
Board

Telephone No.

(916) 670-3132

Supervisor's Name

Sharon

Your Position and Duties

House manager - cook clean pass

out meals

Dates of Employment: From 6-13 To 11-13

Weekly Pay: Starting 600.00 month Ending

Reason for Leaving: Closed

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

NO

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military?

Yes ☒ No ☐

If so, describe: painted warehouse

JOB RELATED REFERENCES

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

Name:

Andy Harris

Telephone No.

(916) 257-2000

Address

2447 marshally way

Occupation:

Self employed

Relationship:

Friend

Number of Years Acquainted:

30

Name:

Peter Martin

Telephone No.

(916) 743-8172

Address

Occupation:

Retired

Relationship:

Friend

Number of Years Acquainted:

35

Name:

Myrauth Hogan

Telephone No.

(916) 670-3132

Address

Occupation:

Relationship:

Friend

Number of Years Acquainted:

20

Please Read Carefully, Initial Each Paragraph and Sign Below

20/ 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.

20/ 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.

20/ 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.

20/ 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.

20/ 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

20/ [Signature]

Date

10-15-19

Interview Note Sheet

Applicant Information	
Name: <u>LW Johnson</u>	Interviewer: <u>Alaura</u>
Date: <u>10/15/2018</u>	Rate of Pay:
Position (s) Applied for: <u>DMD / concessions</u>	Referred by: <u>Victor Mulholland</u>

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

Seeking:
<input checked="" type="radio"/> Full-Time
<input type="radio"/> Part-Time

Relevant Experience & Summary of Strengths

Knife Skills

Total of _____ in Food Service

lots of DMD experience

Cuisines

security - guard card

1
2
3

Stations:

1
2
3

needs FHC

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

LEAD

Other _____

Will Submit

Availability

Open

AM only

PM only

Weekdays only

Weekends only

Details:

preferred

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:

- 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, chaffing dishes)
 - d) Harsh chemicals
 - e) All of the above
- A 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
- C 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

- B 1) A roll of quarters is worth?
a) \$5.00
b) \$10.00
c) \$15.00
d) \$20.00
- B 2) A roll of dimes is worth?
a) \$5.00
b) \$4.00
c) \$3.00
d) \$2.00
- B 3) A roll of nickels is worth?
a) \$8.00
b) \$6.00
c) \$4.00
d) \$2.00
- C 4) A roll of pennies is worth?
a) \$1.00
b) \$0.75
c) \$0.50
d) \$0.25
- C 5) What does POS stand for?
a) Patience over standards
b) Percentage of sales
c) Point of sales
d) People over service
- 6) What is the current sales tax rate in your city _____?
- C 7) A customer buys a bowl of soup for \$1.25, an apple \$0.90 and a soda is \$0.79. If you are given \$10.00 how much change should you give back?
a) \$4.06
b) \$2.06
c) \$7.06
d) \$5.06
- B 8) A customer buys two shirts for 10.50 each and two ball caps for \$7.25 each. If you are given \$50.00 how much change should you give back?
a) \$19.50
b) \$14.50
c) \$9.50
d) \$4.50
- D 9) A customer buys soda for \$3.75 and a hot dog for \$4.25. If you are given \$20.00 how much change should you give back?
a) \$6.00
b) \$8.00
c) \$10.00
d) \$12.00
- A 10) A customer buys two hamburgers at \$3.75 each, two bags of chips at \$1.25 each, two cookies at \$2.50 each and two sodas at \$3.25 each. If you are given \$100.00 how much change should you give back?
a) \$78.50
b) \$58.50
c) \$38.50
d) \$28.50

A

11) Counterfeit pens should be used on which three denominations?

- a) \$20, \$50, \$100
- b) \$10, \$20, \$50
- c) \$5, \$50, \$100
- d) \$10, \$20, \$50

B

12) How many times should you count change when giving it to the customer?

- a) one
- b) two
- c) three
- d) no need to count

Question & Answer:

13) What is the minimum age for legal alcohol purchases? 21

14) What are the acceptable forms of ID for alcohol purchases? CID D2

15) How many \$20 bills are in a bank band? 25

NOTICE TO EMPLOYEE
Labor Code section 2810.5

EMPLOYEE

Employee Name: L.W. Johnson

Start Date: 10/15/2018

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):
1585 The Alameda, Back Cottage, San Jose Ca 95126

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: Acrobat Outsourcing San Jose

Physical Address of Main Office: 1585 The Alameda, San Jose, CA 95126

Mailing Address: " "

Telephone Number: 408-483-4271

WAGE INFORMATION

Rate(s) of Pay: \$ 17.00 Overtime Rate(s) of Pay: \$ 25.50

Rate by (check box): ☒ Hour ☐ Shift ☐ Day ☐ Week ☐ Salary ☐ Piece rate ☐ Commission
☐ Other (provide specifics): BMO @ SJSU

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):

N/A

(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

WORKERS' COMPENSATION

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: _____

PAID SICK LEAVE

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- 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): _____

ACKNOWLEDGEMENT OF RECEIPT

(Optional)

Alaura Cheung
(PRINT NAME of Employer representative)

[Signature]
(SIGNATURE of Employer Representative)

10/15/2018
(Date)

210 Jones St
(PRINT NAME of Employee)

[Signature]
(SIGNATURE of Employee)

10-15-18
(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.

Interview Note Sheet

Applicant Information	
Name:	Interviewer:
Date:	Rate of Pay:
Position (s) Applied for:	Referred by:

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

Seeking:
Full-Time
Part-Time

Relevant Experience & Summary of Strengths

Knife Skills

Cuisines

1

2

3

Stations:

1

2

3

Total of _____ in Food Service

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

Transportation

Car	Public Transit	Carpool (Rider / Driver)
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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	LEAD	Other _____	Will Submit
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Availability

Open	AM only	PM only	Weekdays only	Weekends only
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Details: _____

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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