

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.

PERSONAL INFORMATION

Full Name Christian Lancaster Date: 1-30-19

Home Telephone (415) 533-4832 Other Telephone ()

Present Address 111 Taylor Street S.F., Ca 94102

Permanent Address, if different from present address:

Email Address 111Taylorstreet@gmail.com

EMPLOYMENT DESIRED

Position applying for: _____

Salary desired: _____

Are you currently registered with any staffing and/or employment agencies? If so, please list

Are you applying for: Full-time work? Yes X No _____ Part-time work? Yes _____ No X

Temporary work, e.g., summer or holiday work? Yes _____ No X From: _____ To: _____

How did you find out about our open position? (Please check fill in proper name of source): GeoCare

Referral Name of Referral _____ Newspaper Job Fair Agency Company Website

Other Web Posting Other Source

Could you work overtime, if necessary? Yes X 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 | | | | | | | |
| PM | | | | | | | |

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 X If yes, when?

Do you have friends or relatives working for Acrobat Outsourcing? Yes _____ No X If yes, please state name and relationship

If hired, would you have a reliable means of transportation to and from work? Yes X No _____

If hired, can you present evidence of your legal right to live and work in this country? Yes X 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 X No _____

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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 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? |
|--|--------------|---------------------------|-------------------|
| SF State University | SF, CA | B.A. | Yes |
| 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: Food Handler's Card | | | |

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

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
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
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
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:

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military? Yes _____ No _____
If so, describe:

JOINED REFERENCES

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

Name: Cynthia Cutshall Telephone No. (650) 274-4869

Address 3486 Monroe Ave Lafayette, CA 94549

Occupation: Education Relationship: Friend Number of Years Acquainted: 9

Name: Joe Talkin Telephone No. (510) 637-3600

Address 110 W. American Canyon Rd
American Canyon, CA 94503

Occupation: Store Manager Relationship: Friend Number of Years Acquainted: 4

Name: Angela Hansen Telephone No. (510) 633-5334

Address 1301 Clay Street Oakland, CA 94612

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

Please Read Carefully, Initial Each Paragraph and Sign Below

CJ 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.

CJ 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.

CJ 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.

CJ 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.

CJ 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

1-30-19

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Your Hospitality Staffing Professionals
665 Third St., Suite 415 • San Francisco, CA 94107

First and Last Name: Christian Lancaster
Email: 111Taylorstreet@gmail.com
Phone number: 415.533.4832

Working Experience:

Company Name: Starbucks Coffee Co.

Dates of Employment: 10/98 to 7/01

Job Responsibility:

- Barista
- -
- -
- -

Company Name: Winters Buckhorn Restaurant

Dates of Employment: 1/02 to 5/03

Job Responsibility:

- Dishwasher
- -
- -
- -

Company Name: _____

Dates of Employment: _____

Job Responsibility:

- -
- -
- -
- -

Skills

- -
- -
- -
- -

C 1) After brewing a pot or kettle of coffee how long is the coffee good for until you need to re-brew?
a) 20 minutes
b) 30 minutes
c) 60 minutes

b 2) What are the basic ingredients of a Latte?
a) Milk, Espresso, Whipped Cream
b) Espresso, Steamed Milk
c) Water, Espresso, and Foam

A 3) When making cup of tea for a customer, how long should you tell the customer to let the tea bags steep?
a) 2 minutes
b) 4 minutes
c) 5 minutes

A 4) When steaming milk for a beverage, what temperature should you steam the milk to?
a) 150-160 degrees
b) 190-200 degrees
c) 120-130 degrees

C 5) Once an Espresso Shot has been pulled from an Espresso machine, how long do you have to mix the shot with other liquid before the shot goes bad?
a) 8 seconds
b) 20 seconds
c) 10 seconds

C 6) What do you do if a customer says their latte does not taste like there is espresso in it?
a) Tell them you made the drink according to the recipe so it should be fine
b) Apologize to the customer, then add another shot of espresso to their drink and encourage the customer to return
c) Apologize to the customer and remake their drink according to standards
d) Walk away and have another barista remake their drink

b 7) You can re-steam milk_____?
a) Only Once
b) Never
c) Sometimes
d) Always

b 8) What is the proper ratio of coffee grounds to water?
a) 2 Tablespoons coffee to 6oz water
b) 2 Tablespoons coffee to 8oz water
c) 1 Tablespoon coffee to 6oz water
d) 2 Teaspoons coffee to 8oz water

C 9) A customer requests a non-dairy coffee beverage and you are out of soy, what actions do you take?
a) Make their drink with regular milk and hope they do not notice
b) Apologize and ask the customer to come back tomorrow
c) Apologize and inform the customer we are out of soy, and offer a beverage alternative
d) Inform your manager we are out of soy

b 10) Decaffeinated coffee is 100% caffeine free?

- a) True
- b) False

b 11) What are the basic ingredients in a cappuccino?

- a) Coffee, Milk, Foam
- b) Espresso, Foam
- c) Espresso, Steamed Milk, Foam
- d) Espresso, Cream, Foam

A 12) What is a café au lait?

- a) Coffee, Steamed Milk
- b) Coffee, Cold Milk
- c) Coffee, Cream, Sugar
- d) Espresso, Cold Milk

C 13) What does "half caf" mean?

- a) Half cream and half regular milk
- b) Half as much coffee as normal
- c) Half regular and half decaf coffee

b 14) What does it mean when a customer requests their cappuccino "dry"?

- a) Less milk and more foam
- b) No milk and lots of foam
- c) Extra foam
- d) No foam and no milk

b 15) What is an Americano?

- a) Regular drip coffee
- b) Espresso with water
- c) Coffee with cream
- d) Iced coffee

Dishwasher Test

Score 8 / 10

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

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

C 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

A 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

