

Interview Note Sheet

Applicant Information	
Name: <u>Gregory Morse</u>	Interviewer: <u>Keenan</u>
Date: <u>01/23/19</u>	Rate of Pay:
Position (s) Applied for: <u>Dish, Prep Cook</u>	Referred by: <u>111 Taylor St.</u>

Test Scores					
Server	/35	%	Bartender	/30	%
Prep Cook	<u>5/20</u> /15	%	Barista	/10	%
Grill Cook	/40	%	Cashier	/15	%
Dishwasher	<u>10</u> /10	%	Housekeeping	/16	%

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

Relevant Experience & Summary of Strengths

Server	Total of <u>10 yrs</u> in Food Service/Hospitality <u>Cook</u> <u>Leggie Prep Butcher</u> <u>Secondary cook/line</u>
Bartender	<u>Dish: 3 Sink or Machine</u> <u>pots / pants</u>
Cashier	
Concessionaire	House Keeper

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

Transportation

Car	<u>Public Transit</u>	Carpool (Rider / Driver)
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Regions Available to work:

<u>SF City</u>	SF North	SF Peninsula	<u>East Bay</u>	Outer East Bay
San Jose	South San Jose	SJ Peninsula		

Certifications (if any)

TIPS	<u>Serv-Safe</u>	<u>LEAD</u>	Other _____	Will Submit
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Availability

<u>Open</u>	AM only	PM only	Weekdays only	Weekends only
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Details: _____

Uniforms Owned:

Bistro	<u>Black Bistro</u>	Tuxedo	<u>1/2 Tuxedo</u>	Black Vest	Long Black Tie
Chef Coat	Chef Pants	Knives	<u>Black Pants</u>	<u>Non-Slip Shoes</u>	Bow Tie Other: _____

Would you recommend this applicant for Acrobat Academy?

Convention Candidate?

Other Languages Spoken:

yesyesyes

NOTICE TO EMPLOYEE
Labor Code section 2810.5

EMPLOYEE

Employee Name: Morse, Gregory
Start Date: 02/04/19

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:
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: _____

WAGE INFORMATION

Rate(s) of Pay: Stipend: Dish \$15.50/hr prep \$17.00 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

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)

KM Sowell
(PRINT NAME of Employer representative)

KMS
(SIGNATURE of Employer Representative)

(Date)

Gregory Morse
(PRINT/NAME of Employee)

G. Morse
(SIGNATURE of Employee)

02-04-19
(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.

FCI OTISVILLE
Otisville, New York
10963

To whom it may concern :

I am writing this letter of recommendation on behalf of Gregory Morse as his cooksupervisor over the past 5 years .

Gregory was always a hard working man . He has a determination and desire to always improve he takes every challenge and meets it .

Gregory takes a leadership role, while working he goes above and beyond his duties. He will start work early and if needed will work on his scheduled days off . He does this through dedication ,reliability and his eagerness to always strive forward and learn and proves to be a role model for his co workers a leader worthy of following. He will pre prep everything feasible this makes my job easier and ensures our product is of its highest quality when served.

Gregory would be an asset to any employer who would hire him. Gregory will excell in any of his selective undertakings . I his prior supervisor would recommend him with high regard.

Cook supervisor

Clare w. Clune Jr.

FCI OTISVILLE

(845)386-6700

CERTIFICATE OF COMPLETION

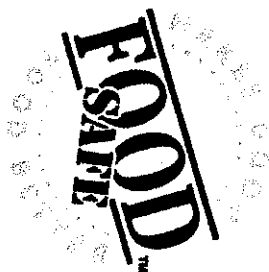
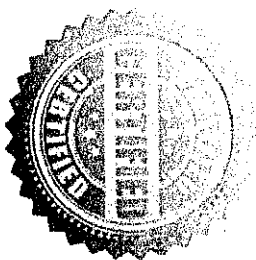
This is to certify that
GREGORY MORSE

Has successfully completed the requirements for the Food Safety First for food handler training program provided by Drexel University, Education Programs.com and FCI Otisville.
Skill sets include: What is food safety; Food storage; Food preparation and service; Who is responsible; Contamination of Food; Microbiology; Personal hygiene; Temperature control; Cleaning and sanitizing; Pest control

On this 12th day of July 2016



K. Davitt
A.C.E. Coordinator



Food Safety First Certificate of Training

This certifies that on 7/12/2016

GREGORY MORSE

Trainee's Name

completed a 9 hour foodhandler training program

written by Drexel University and provided by Education Programs.

Topics covered:

- What is food safety?
- Food storage
- Food preparation and service
- Who is responsible?
- Contamination of Food
- Microbiology
- Personal hygiene
- Temperature control
- Cleaning and sanitizing
- Pest control

 Education Programs

Since 1990



Certified Food Manager Signature

CERTIFICATE OF COMPLETION



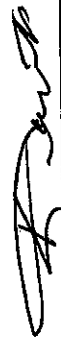
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On this 12th day of July 2016

A handwritten signature in cursive script, likely belonging to K. Davitt.

K. Davitt

A.C.E. Coordinator

