

**Submission Date** 06-04-2019 23:57:11

**First Name**

alissa

**Last Name**

chapelaine

**E-mail Address**

shearkhansproles@gmail.com

**Phone**

5303537222

**Address**

2323 Oro ave

**Unit or Number**

None

**City, State**

OROVILLE

**Zip Code**

95966-9543

**What region(s) are you applying to work within?**

- Sacramento


**Which position(s) are you applying for?**

- Bartender

**Are you applying for:**

- Part-Time

**When can you start?**

 Saturday, June 08, 2019

**Can you work overtime?**

Yes

**How did you hear about us?**

- Referral

**If you were referred, please tell us by whom:**

ABC bartending college

**What days/times can you work? Select all that apply:**

- Monday AM
- Monday PM
- Tuesday AM
- Tuesday PM

- Wednesday PM
- Thursday PM
- Friday AM
- Friday PM
- Saturday AM
- Saturday PM
- Sunday AM
- Sunday PM

**Have you ever applied to or worked for Acrobat before?**

No

**If hired, would you have reliable means of transportation to and from work?**

Yes

**If hired, can you present evidence of your legal right to live and work in this country?**

Yes

**State age if under 18. If you are under 18, hire is subject to verification that you are of minimum age to work.**

CA

**Are you able to perform the essential functions of the job for which you are applying?**

Yes

**Name of School**

Las plumes high

**City & State**

Oroville ca

**Grade/Degree**

12

**Graduated?**

Yes

**Do you have any special licenses? (If so, label under "Special")**

Yes

**Are you computer literate? (If so, label which programs under "Special")**

No

**Are you proficient with Point of Sale systems? (If so, label which under "Special")**

Yes

**Do you have any experience, training, qualifications or special skills? (If so, label under "Special")**

Yes

**Special:**

I currently have a cosmetology license, just finished bartending school in Sacramento, I have used square and PayPal for credit card payments, and can communicate well with customers since I've been a stylist for over 10yrs.

**Are you currently employed?**

Yes

**Can we contact your current employer?**

No

**Name and Address of Employer**

Hair Chix

**Type of Business**

Salon

**Phone Number**

5305344142

**Your Position & Duties**

Owner and stylist

**Date of Employment (from/to):**

5/14 current

**Reason for Leaving**

Pursuing new occupation

**Still Employed:**

Yes

**First Name**

Steven

**Last Name**

Heald

**E-mail Address**

stevenheald83@gmail.com

**Phone**

5305213233

**Relationship:**

Friend

**Years Acquainted:**

10

**First Name**

Tiffany

**Last Name**

Edwards

**E-mail Address**

Butterflystar\_987@yahoo.com

**Phone**

+1 (530) 693-1224

**Relationship:**

Coworker

**Years Acquainted:**

10

**First Name**

Tiffany

**Last Name**

Orsborn

**E-mail Address**

tiffany@att.net

**Phone**

+1 (408) 679-1512

**Relationship:**

Friend

**Years Acquainted:**

10

**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.**

- (Checked box indicates acknowledgement)

**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.**

- (Checked box indicates acknowledgement)

**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.**

- (Checked box indicates acknowledgement)

**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.**

- (Checked box indicates acknowledgement)

**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.**

- (Checked box indicates acknowledgement)

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

- (Checked box indicates acknowledgement)

**Applicant Digital Signature (Type Name):**

Alissa Chapdelaine

**Date:**



Tuesday, June 04, 2019

**Please Attach Resume Below**

[bar resume.docx](#)

