

Interview Note Sheet
Server

Applicant Information					
Name: <u>Claudia Doughty</u>			Interviewer: <u>Elyse</u>		
Date: <u>1/7/20</u>			Rate of Pay: <u>\$13</u>		
Position (s) Applied for: <u>server/bar</u>			Referred by: <u>Indeed</u>		
Test Scores					Seeking:
Server	/35	%	Bartender	/30	%
Prep Cook	/15	%	Barista	/10	%
Grill Cook	/40	%	Cashier	/10	%
Dishwasher	/10	%	Housekeeping	/16	%
					<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Relevant Experience & Summary of Strengths					
Total of _____ Experience in Food Service/Hospitality					
How many customers or tables are you used to serving at one time? How would you react if an extra table was added to your section?	How many items can you carry on a tray? Please describe how to pick up a large oval tray.	How is a banquet server different from a regular restaurant server?	Notes:		
<u>5-15 tables banquets</u>	<u>16 w/ plate covers</u>	<u>Banquet - formal table - more fun</u>	<u>- pizzeria</u> <u>- country club</u> <u>- photography</u> <u>- HIVE</u>		
P.O.S. Experience: Y / N details: _____					
Transportation			Regions Available to work:		
<u>yes</u>			<u>open</u>		
Certifications (if any)			Availability		
<u>FHC, Bar Cert</u>			<u>see application</u>		
Uniforms Owned:			Recommendations:		Other Languages Spoken:
<input checked="" type="checkbox"/> Bistro White <input checked="" type="checkbox"/> Black Bistro Tuxedo 1/2 Tuxedo Black Vest Long Black Tie Other:	Chef Coat Chef Pants Knives <input checked="" type="checkbox"/> Black Pants <input checked="" type="checkbox"/> Non-Slip Shoes Bow Tie Cut Glove	_____ Acrobat Academy _____ Lead Academy		<u>ASL</u>	

Claudia Doughty

3966 Bob Street
San Diego, California, 92110
6072266076
doughty96@yahoo.com

Education

Sherburne-Earlville Central School
High School Diploma

Sherburne, New York
Graduated June 2015

Regents Diploma with Honors

SUNY Morrisville
Associate of Science - Health Studies

Morrisville, New York
Graduated May 2017

Phi Kappa Theta

Dean's List

Employment History

Vantive Imaging, LLC
Photographer

June 2019 - January 2020

- * Responsible for the custody and care of all photography equipment
- * Take 4 to 5 photographs of each individual member of the contracted organization meeting requisite posing, setup and quality standards
- * Travel 100% of the time, working with minimal supervision

Vantive Imaging, LLC
Account Representative

Hamilton, New York
October 2018 - June 2019

- * Responsible for scheduling photography sessions around the country and ensuring that the photography teams were equipped with the correct information and equipment to complete each task
- * Handled payments for services rendered
- * Provided each client with excellent customer service

Canasawacta Country Club
Server/Bartender

Norwich, New York
April 2017 - August 2019

- * Provided excellent customer service to all guests
- * Complied with all state regulations for beverage and food service
- * Extensive cocktail and food menu knowledge
- * Experienced working with large crowds of varied cultures
- * Maintained cleanliness and full stocking of bar
- * Experience serving and bartending numerous banquets and events

HIVE
Bartender

San Diego, California
December 2019 - Present



ACROBAT OUTSOURCING
TSC GROUP

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 Claudia Doughty Date: 1/7/20
Home Telephone (607) 226 6076 Other Telephone ()
Cell Present Address 3966 Bob Street San Diego CA 92110
Permanent Address, if different from present address: _____
Email Address Doughty 96 @ yahoo.com

EMPLOYMENT DESIRED

Position applying for: Server Salary desired: \$13.00

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 _____ 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?

Immediately (1/7)

Farmers - 22-23 & 25-26

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	<u>ALL DAY</u>	<u>Not Available</u>			<input checked="" type="checkbox"/>		
PM			<u>3pm - close</u>	<u>3pm - close</u>	<u>4pm - close</u>	<u>Open - 6pm</u>	<u>Open - 5pm</u>

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

*With at least 1 week notice I can be available any time

14750 NW 77th Court, Suite 100 | Miami Lakes, FL 33016
T 305.681.8800 • F 305.681.8804 • theservicecompanies.com

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 _____

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?

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 HIVE Hearny Mesa, CA

Type of Business Restaurant / Bar Telephone No. (858) 576-0700 Supervisor's Name Scott Na

Your Position and Duties Bartender
Serve drinks and provide an excellent guest experience

Dates of Employment: From 12/10/19 To current

Reason for Leaving: Still employed

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: _____

JOB RELATED REFERENCES

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

Name: Brandy Harvey Telephone No. (607) 316 8166
Address Sherburne, NY
Occupation: Account Representative Relationship: Former Coworker Number of Years Acquainted: 1


Name: Heather McShane Telephone No. (607) 244 0325
Address Norwich, NY
Occupation: Bar/ending Manager Relationship: Previous Manager Number of Years Acquainted: 4

Name: Dave Shull Telephone No. (607) 334 6278
Address Norwich NY
Occupation: Restaurant Owner Relationship: Former Employer Number of Years Acquainted: 4

Please Read Carefully, Initial Each Paragraph and Sign Below

- ☒ 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.
- ☒ 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.
- ☒ 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.
- ☒ 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.
- ☒ 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 1/7/20



THE SERVICE
COMPANIES

SERVICE. ABOVE ALL

Name Claudia Doughty

Servers Test

Score / 35

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
- D 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
- B 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 dining 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



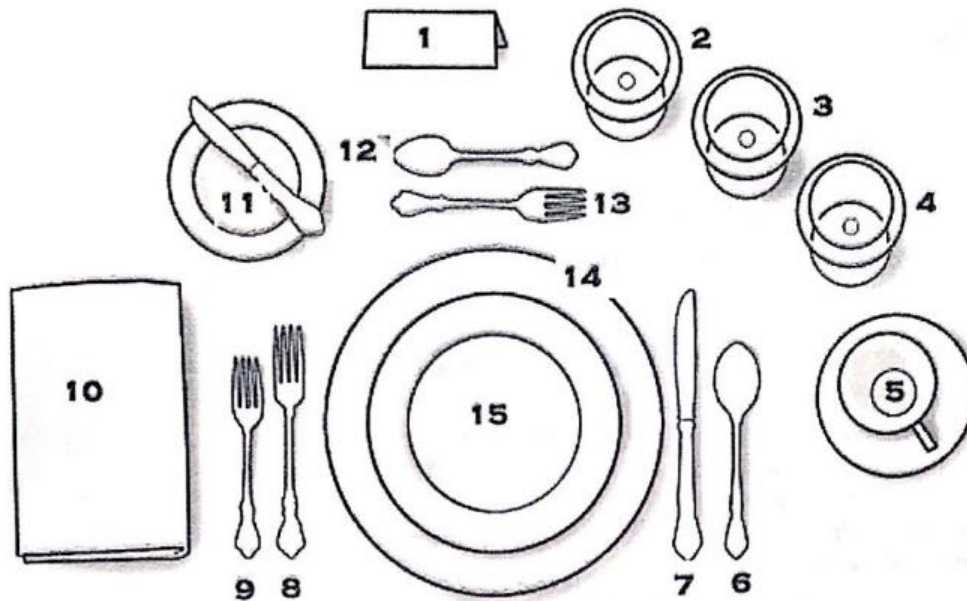
THE SERVICE
COMPANIES

SERVICE. ABOVE ALL

Name _____

Servers Test

Score / 35



Match the Number to the Correct Vocabulary

<u>10</u>	Napkin	<u>8</u>	Dinner Fork
<u>11</u>	Bread Plate and Knife	<u>5</u>	Tea or Coffee Cup and Saucer
<u>1</u>	Name Place Card	<u>7</u>	Dinner Knife
<u>12</u>	Teaspoon	<u>3</u>	Wine Glass (Red)
<u>13</u>	Dessert Fork	<u>9</u>	Salad Fork
<u>6</u>	Soup Spoon	<u>14</u>	Service Plate
<u>15</u>	Salad Plate	<u>4</u>	Wine Glass (White)
<u>2</u>	Water Glass		

Fill in the Blank

- The utensils are placed 3 inch (es) from the edge of the table.
- Coffee and Tea service should be accompanied by what extras? Cream + Sugar
- Synchronized service is when: The entire meal is served at once?
- What is generally indicated on the name placard other than the name? What food they've ordered.
- The Protein on a plate is typically served at what hour on the clock? 6:00
- If a guest asks for a specialty dinner (i.e. Gluten-Free or Vegetarian) you should do what immediately?

Notify the Kitchen

NOTICE TO EMPLOYEE

Labor Code section 2810.5

EMPLOYEE

Employee Name: Claudia Doughty

Start Date: 1/7/2020

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: _____

Physical Address of Main Office: _____

Mailing Address: _____

Telephone Number: _____

WAGE INFORMATION

Rate(s) of Pay: \$13 Overtime Rate(s) of Pay: 19.50

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)

JJ Fk hgt
(PRINT NAME of Employer representative)

[Signature]
(SIGNATURE of Employer Representative)

1/7/20
(Date)

Claudia Doughty
(PRINT NAME of Employee)

[Signature]
(SIGNATURE of Employee)

1/7/2020
(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.



Earned Sick Leave and Minimum Wage Employee Notification Form

Legal Name of Hiring Employer: S.E. Scher Corp
D/B/A of Hiring Employer (if different than Legal Name): Acrobat Outsourcing
Employer's Address: 2525 Camino Del Rio South Ste. 310, San Diego, CA 92108
Employer's Phone number: 858-771-0010
Employee Name: Claudia Dougherty
Employee Start Date: _____

As of July 11, 2016, all Employers must:

- Pay no less than \$10.50 per hour and provide paid sick leave to all employees who perform at least two (2) hours of work in one work week within the geographic boundaries of the City of San Diego
- Allow employees to begin using accrued sick leave after the ninetieth (90) day of employment or after July 11, 2016, whichever is later
- Post the Earned Sick Leave and Minimum Wage notices published each year by the City in a conspicuous place at workplace or job site where employees work
- Create contemporaneous records documenting employees' wages earned and accrual and use of earned sick leave. These records must be provided to employees on a regular basis and retained by employer for at least three (3) years
- Allow Enforcement Official reasonable access to the workplace to inspect and interview witnesses in furtherance of an investigation

Employee rights:

- Employees who assert any rights provided in the Earned Sick Leave and Minimum Wage Ordinance are protected from retaliation
- Employees may file a civil lawsuit against their employers for any violation of the Ordinance or may file a complaint with the City of San Diego Enforcement Office

If you have questions, need additional information or believe your employer has violated any provision of this law, please contact your employer or visit the City of San Diego Minimum Wage Enforcement Office website at:

<https://www.sandiego.gov/treasurer/minimum-wage-program>

Acknowledgement of Receipt:

JJ Fitchugh
(PRINT NAME of Employer representative)

[Signature]
(SIGNATURE of Employer Representative)

1/7/20
(Date)

Claudia Dougherty
(PRINT NAME of Employee)

Claudia Dougherty
(SIGNATURE of Employee)

1/7/2020
(Date)

The employee's signature on this notice merely constitutes acknowledgement of receipt.