



**1 Centerpointe Drive, Suite 400
La Palma, CA 90623**

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

IMPORTANT: Please fill in your response above each line unless otherwise indicated.
All answers must be printed or typed. Answers that are illegible or incomplete may prevent us from considering your application.

PERSONAL INFORMATION:

Please Print

Date Last Name First Name Middle

No. & Street City State Zip

Business Phone Home Phone

EMPLOYMENT DESIRED:

Position applying for: _____ Availability: _____ Salary desired: _____

How did you hear about us? _____

Have you ever applied to work for FFC before? Yes No

If yes, when? _____

Do you have any friends or relatives working for FFC ? Yes No

If yes, state name(s) and relationship:

_____ Relationship _____

_____ Relationship _____

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

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? 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. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes No

(Convictions for marijuana-related offenses that are more than two years old need not be listed.)
If yes, state nature of the crime(s), when and where convicted, and disposition of the case.

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.)

EMPLOYMENT HISTORY

IMPORTANT! List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume					
Name of Employer	City and State	Employment Dates	Salary	Position(s) Held	Reason for Leaving

Please explain any gaps in employment

Have you ever been suspended, placed on probation, asked to resign, discharged or terminated? Yes No

If yes please explain:

ACADEMIC HISTORY

IMPORTANT! List below your educational background starting with your High School					
Schools/Colleges	Location	Major	No. of years completed	Certification/Diploma Degree	Special Accomplishments

PROFESSIONAL REFERENCES

IMPORTANT! Please list professional/business references ONLY					
Name	Title	Company	Address	Phone	Relationship

MILITARY SERVICE AND STATUS

BRANCH OF SERVICE (IF NONE, STATE NONE): _____

MILITARY OCCUPATION: _____

DATE OF ENTRY INTO ACTIVE DUTY: ____/____/____ DATE OF SEPARATION: ____/____/____
(MONTH/YEAR) (MONTH/YEAR)

RANK AT THE TIME OF SEPARATION: _____

PLEASE NOTE: FINAL PROCESSING PRIOR TO EMPLOYMENT WILL REQUIRE A REVIEW OF THE ORIGINAL OR A COPY OF YOUR MILITARY DISCHARGE AND/OR A REVIEW OF YOUR DD FORM 214.

Signature _____ Date _____

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 fact 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 Friendly Franchisees Corporation, 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 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, 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.

_____ Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company. I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above

In consideration of employment, I agree to conform to the rules and standards of the company and agree that my employment and compensation can be terminated at will, at any time, either at my option or of the company.

Signature _____ Date _____

Thank you for completing this application. It will remain under consideration for six (6) months. It will not be necessary for you to reapply during this six month period. Your interest in FFC is appreciated.