EMPLOYMENT APPLICATION

Please Print	Red ID#			Date	
Name				Employee #	
Last	First		Middle		Issued by HR
Home ()		Cell ()		Email	
	mber		Driver's License #	ŧ	State issued
AddressNumb	C.		C'.	St. 4	7.
Numb	er Street		City	State	Zip
What position are y	ou applying for?				
Please list the name	es of any near relatives* or	r friends that worl	k for Aztec Shops:		
	question near relatives shall be in , daughter-in-law, and step relati		g parent, child, wife, hus	sband, brother, sister, brother-in-law	, sister-in-law, mother-in-law,
				Home	Work Cell
Emergency Contac	tName		Phone Nur	mber	
		Persona	I Information	on	
Have you ever wor	ked for Aztec Shops befor	re?			
Yes	Dining Services C	ampus Stores	☐ Corporate	When:	
No					
Are you able to per	form the essential function	ns of the job for w	which you are apply	ring with or without accomo	dation?
Yes No	Describe the funct	tion(s) that cannot	t be performed or re	equire accomodation:	
	Note: We comply with the essential functions.	e ADA and consider reason	onable accommodation me	asures that may be necessary for eligable	applicants/employees to perform
Are you able to per	form all other duties of the	e job for which yo	ou are applying?		
Yes No	Describe duties ur	nable to be perform	med:		
Have you ever been	n convicted of a felony or	theft-related misd	lemeanor?		
				nature of the felony or theft-re	
No					

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

High School College/University Vocational/Business Are you currently enrolled on any campus? Name of campus	Education, Training and Experience						
College/University	School Name, City & State	No. of Years Comp	leted Did You Graduate	P Degree or Diploma			
Are you currently enrolled on any eampus? Name of campus	High School						
Are you currently enrolled on any campus? Name of campus	College/University						
Major	Vocational/Business						
Employment History List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a résumé. Are you currently employed? Yes No If so, may we contact your current employer? Yes No 1. Name of Employer Address Number Street City State Zip Telephone No. () Your Supervisor's Name Your Position and Duties Date of Employment From To Weekly /Hourly Pay: Starting Ending Reason for Leaving: 2. Name of Employer Address Number Street City State Zip Telephone No. () Your Supervisor's Name		Name of campus					
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AddressNumber Street City State Zip Telephone No. () Your Supervisor's Name Your Position and Duties Date of Employment From To Weekly /Hourly Pay: Starting Ending Reason for Leaving: 2. Name of Employer Address	If so, may we contact your current emplo	oyer?					
Number Street City State Zip Telephone No. () Your Supervisor's Name	1. Name of Employer						
Your Position and Duties			State	Zip			
Date of Employment From To To Ending Ending Ending	Telephone No. ()	You	ır Supervisor's Name				
Weekly /Hourly Pay: Starting Ending	Your Position and Duties						
Reason for Leaving: 2. Name of Employer Address Number Street City State Zip Telephone No.() Your Supervisor's Name	Date of Employment From	То _					
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Please read carefully. Initial each paragraph and sign below. Aztec Shops, Ltd. retains the right to hire the person who appears to best fit its needs at this time. There will not be an explanation (unless specifically required by law) as to what factors went into this decision. 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 Aztec Shops, Ltd 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 Aztec Shops, Ltd. 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 Aztec Shops, Ltd., 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. Birth Date __ _I understand that if hired, I must provide documentation to verify my identity and eligibility to work in the United States. I also understand that Aztec Shops reserves the right to have physical examinations conducted by a licensed physician. I understand employment at Aztec Shops Ltd, is at-will; employment may be terminated at the will of either Aztec Shops, Ltd, or myself. Further, I understand that except for the employment at-will status, any and all policies or practices can be changed at any time by Aztec Shops, Ltd. Under provisions of Title V of the Education Code, Aztec Shops, Ltd. is required to submit verification of employment to the SDSU Financial Aid Office on all part-time student employees. Applicant's Signature _____ **Post Employment Information** Hiring Manager: Please Check Appropriate Answers 1. Hire Date: ____ 7. Home Dept _____ Cost Center 8. ____Part-time **OR** ____Full-time: □HR □Sal 2. Married Single 3. Male_____ Female 9. Position _____ ____Yes ____No 4. Student: 10. Primary Job _____ 4a. At SDSU? ____Yes ____No 11. Pay Grade _____ Step____ \$____ 5. Birth Date: 12. Reports To _____ 6. Ethnicity: W____ B/AA___ HS/LAT____ AS____ AmI/AL___ HI/PI___ +2___ Hiring Manager Signature Date Director _____ Signature Date Senior Director of Management Services _____

Signature