



EMPLOYMENT APPLICATION

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any prohibited basis including race, color, age, sex, religion, disability, national origin, or veteran status.

Personal

Name: last (maiden) first middle

Address: street city state zip

Phone Number () - Social Security # - - -

Are you 16 or older? YES NO If No, Age: Are you legally able to work in the U.S.? YES NO

Emergency -- notify: Phone () - Relationship:

General

Driver's License # State: Expiration Date: / /

Have you ever been employed by Krystal or a Krystal Franchisee? YES NO
If Yes, When and Where:

Have you ever been convicted of a felony criminal offense? YES NO
Explain: Where: Date: / /

Availability

Position desired: Full-Time or Part-Time

Date you can start: / / Salary/Pay Rate desired:

Although you may be hired for a specific shift, business necessity may require that you work overtime, different hours or days. Is that acceptable to you? YES NO

Education

	Name and Location of School	Last Year Completed	Did you Graduate?	Subjects Studied and Degree(s) Received
High School / G.E.D.	_____ city state		<input type="checkbox"/> YES <input type="checkbox"/> NO	
College	_____ city state		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Other (Trade, Business, etc.)	_____ city state		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Other	_____ city state		<input type="checkbox"/> YES <input type="checkbox"/> NO	

Special Skills

Employment History

Account for all periods of employment and list periods of unemployment beginning with your present or most recent position. All information including salary will be verified.

May we contact your present employer? YES NO

FROM	TO	EMPLOYER Name & Address	SUPERVISOR Name & Title	YOUR POSITION	RATE/ SALARY	REASON FOR LEAVING

References

Give the names of three people not related to you, whom you have known for at least one year.

NAME	ADDRESS	PHONE	YEARS KNOWN

Please Read this Statement Carefully

I understand that employment with the Krystal Company is at will, and that either the Company or I can terminate this employment relationship at any time, for any reason, with or without notice and with or without cause. I further understand that neither this application nor any other written or oral communication I may receive from the Company or any of its employees constitutes or creates a contract of employment.

I authorize the Company to contact any or all of my former employers listed herein and to inquire about my employment there. I release the Company and any employer who is contacted from any liability arising out of such inquiry or the response to such inquiry.

I understand that as part of the employment application process that an investigative report may be made whereby information is obtained through personal interviews with third parties including matters of public record. You have the right to make a written request within a reasonable period of time for a complete disclosure of additional information concerning the nature and scope of the investigation.

I certify that the statements contained herein are true to the best of my knowledge and belief. I understand that if I am employed by the Company, any false or misleading statement on this application or during the course of any employment interview, may result in discipline up to and including immediate discharge.

Signature: _____

Date: _____