

TRAINING TABLE RESTAURANT EMPLOYMENT APPLICATION

STORE LOCATION _____ DATE _____

NAME MUST MATCH NAME ON SOCIAL SECURITY CARD _____ SOCIAL SECURITY NO. _____

NAME _____ STREET ADDRESS _____

APT. NO. _____ AREA _____ TEL _____
OR BOX _____ CITY _____ STATE _____ ZIP _____ CODE _____ NO. _____

ARE YOU 18 YES EVER WORKED AT A TRAINING TABLE RESTAURANT BEFORE?
OR OLDER? NO, IF, NOT AGE _____ IF YES, DATES, LOCATION AND REASON FOR LEAVING? _____

AVAILABILITY:

		M	T	W	T	F	S	S
TOTAL HOURS AVAILABLE PER WEEK _____	HOURS AVAILABLE:	FROM						
		TO						

ARE YOU LEGALLY ABLE TO BE EMPLOYED IN THE U.S.: YES NO HOW DID YOU HEAR OF JOB? _____ HOW FAR DO YOU LIVE FROM THE RESTAURANT _____ DO YOU HAVE TRANSPORTATION TO WORK? _____

SCHOOL MOST RECENTLY ATTENDED:

NAME _____ LOCATION _____ PHONE _____

TEACHER OR COUNSELOR _____ DEPT. _____ LAST GRADE COMPLETED _____ GRADE POINT AVERAGE _____

GRADUATED: YES NO NOW ENROLLED: YES NO SPORTS OR ACTIVITIES _____

TWO MOST RECENT JOBS: (IF NOT APPLICABLE, LIST U.S. MILITARY, WORK PERFORMED ON A VOLUNTEER BASIS OR PERSONAL REFERENCES)

COMPANY _____ LOCATION _____

PHONE _____ JOB _____

SUPERVISOR _____ DATES WORKED: FROM _____ TO _____

SALARY _____ REASON FOR LEAVING _____ **REFERENCE CHECK DONE BY** _____

COMPANY _____ LOCATION _____

PHONE _____ JOB _____

SUPERVISOR _____ DATES WORKED: FROM _____ TO _____

SALARY _____ REASON FOR LEAVING _____ **REFERENCE CHECK DONE BY** _____

The Secretary of Health and Human Services has determined that certain diseases, including hepatitis A, salmonella, shigella, staphylococcus, streptococcus giardia and campylobacter may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves handling and serving food, food service equipment and utensils in a sanitary and healthy fashion. Is there any reason why you cannot perform the essential functions of this job?
 YES NO If yes, explain: _____

*DURING THE PAST 7 YEARS, HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS?
 YES NO IF YES, DESCRIBE IN FULL: _____ *A conviction will not necessarily bar you from employment.

- I certify that the information contained on this application is correct to the best of my knowledge and understand that any omission or erroneous information is grounds for dismissal in accordance with the policy of this Training Table Restaurant.
- I authorize the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise and release all parties from all liability for any damage that may result from furnishing same to you.
- I understand that if I am employed, my employment will be for no definite period of time and that my employment may be terminated at-will, with or without cause and with or without notice.

DATE _____ Signature _____

This Training Table Restaurant is an Affirmative Action and Equal Opportunity Employer. Various Federal, State, and Local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability or veterans status. It is this Training Table Restaurant's policy to comply fully with these laws, as applicable, and information requested on this application will not be used for any purpose prohibited by law.

YOUR APPLICATION WILL BE CONSIDERED ACTIVE FOR 30 DAYS - FOR CONSIDERATION AFTER THAT YOU MUST REAPPLY.

04/2014

PLEASE DETACH THIS SECTION AND TAKE IT WITH YOU.



A UTAH ORIGINAL™

The Training Table Restaurants, Inc. is a rapidly growing food service company that combines quality menu items, moderate prices and a high level of service. As a Training Table employee, you are a key element in our goal of 100% satisfied customers. We offer:

- **Competitive Salary**
- **Flexible Work Schedules**
- **Advancement Opportunities**
- **Friendly Workplace**
- **Meal Benefits**
- **Wage Reviews**
- **Uniforms**

If hired, Federal law requires you furnish documentation showing your identity and that you are legally authorized to work in the United States.

SEE THE BACK PORTION OF THIS TAB FOR SPECIFIC DOCUMENTS NEEDED.

**DOCUMENTS NEEDED FOR
EMPLOYMENT AT THE
TRAINING TABLE
RESTAURANTS, INC.**

United States law requires that, if hired you must furnish your Social Security card* and one of the following documents within 72 hours of starting work:

- A federal, state or local government identity card
- Driver's license with photo
- School I.D. card with photo
- Current INS Forms with employment authorization stamp
- U.S. Passport
- Voter Registration Card
- U.S. military I.D. card or draft card
- Unexpired foreign passport with employment authorization

*In place of a Social Security card, the following documents are also acceptable: an original or certified copy of a U.S. birth certificates, or U.S. Department of State Forms FS-545 or DS-1350 or INS Forms I-179, I-197, I-327 or I-571

Form W-4 (2014)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2014 expires February 17, 2015. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income: tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4p.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2014. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

Personal Allowances Worksheet (Keep for your records.)

A Enter "1" for yourself if no one else can claim you as a dependent **A**

B Enter "1" if: {

- You are single and have only one job; or
- You are married, have only one job, and your spouse does not work; or
- Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.

C Enter "1" for your spouse. But, you may choose to enter "0-" if you are married and have either a working spouse or more than one job. (Entering "0-" may help you avoid having too little tax withheld). **C**

D Enter number of dependents (other than your spouse or yourself) you will claim on your tax return **D**

E Enter "1" if you will file as **head of household** on your tax return (see conditions under **Head of household** above) **E**

F Enter "1" if you have at least \$2,000 of **child or dependent care expenses** for which you plan to claim a credit **(Note.** Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.) **F**

G **Child Tax Credit** (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. {

- If your total income will be less than \$65,000 (\$95,000 if married), enter "2" for each eligible child; then **less "1"** if you have three to six eligible children or **less "2"** if you have seven or more eligible children.
- If your total income will be between \$65,000 and \$84,000 (\$95,000 and \$119,000 if married), enter "1" for each eligible child **G**

H Add lines A through G and enter total here. **(Note.** This may be different from the number of exemptions you claim on your tax return.) ▶ **H**

For accuracy, **complete all worksheets that apply.** {

- If you plan to **itemize or claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
- If you are **single and have more than one job** or are **married and you and your spouse both work** and the combined earnings from all jobs exceed \$50,000 (\$20,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
- If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 below.

----- **Separate here and give Form W-4 to your employer. Keep the top part for your records.** -----

W-4 Form Department of the Treasury Internal Revenue Service	Employee's Withholding Allowance Certificate	OMB No. 1545-0074 2014	
1 Your first name and middle initial		2 Your social security number	
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate.	
City or town, state, and ZIP code		Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.	
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		5	
6 Additional amount, if any, you want withheld from each paycheck		6 \$	
7 I claim exemption from withholding for 2014, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶ 7 			
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.			
Employee's signature (This form is not valid unless you sign it.) ▶			
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional) 10 Employer identification number (EIN)	
		Date ▶	