



## MANAGEMENT EMPLOYMENT APPLICATION

We are pleased that you are interested in management opportunities at Outback Steakhouse. Please complete the application below. Thank you.

Last Name	First Name	Middle Name	Date
Street/P.O. Box	Apt. #	City	State ZIP
Day Phone No.	Evening Phone No.	Social Security No.	
Position Applying For: <input type="radio"/> Kitchen Manager <input type="radio"/> Manager			

1. Have you ever applied for any position at Outback Steakhouse or an affiliated company before? .....  Yes  No  
 If yes, which location? \_\_\_\_\_  
 What was the result? \_\_\_\_\_
  
2. Have you ever been employed by Outback Steakhouse or an affiliated company? .....  Yes  No  
 If yes, which restaurant? \_\_\_\_\_  
 When? From: \_\_\_\_\_ / \_\_\_\_\_ To: \_\_\_\_\_ / \_\_\_\_\_  
                     Month    Year                      Month    Year  
 Who was your supervisor? (Name and Phone) \_\_\_\_\_  
 What was your position? \_\_\_\_\_  
 Why did you leave? \_\_\_\_\_
  
3. If hired, can you submit documents to prove your legal right to work in the United States? .....  Yes  No
4. Because the hours and shifts are so varied, it is necessary for you to have a reliable method of transportation. Do you have reliable transportation? .....  Yes  No  
 You may be required to drive. Do you have a valid driver's license? .....  Yes  No
5. Are you willing to work every weekend and any night? .....  Yes  No
6. Are you willing to work holidays? .....  Yes  No
7. Are you willing to relocate? .....  Yes  No  
 Please list your relocation preferences. \_\_\_\_\_  
 List any areas to which you would prefer not to relocate. \_\_\_\_\_
  
8. We do not permit smoking in operating areas. Are you willing to comply? .....  Yes  No
9. \*Have you been convicted of a felony that has not been annulled, expunged or sealed by the court? .....  Yes  No  
 (Conviction will not necessarily disqualify an applicant from employment, but will be considered in the context of the entire application and position(s) applied for.)  
 \*California residents only: You may exclude any marijuana related convictions over two years old.  
 \*Massachusetts residents only: An applicant for employment who has a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.
10. Has the EEOC, a civil court, previous employer, or other agency ever determined that you have engaged in sexual harassment? .....  Yes  No
11. What total compensation do you require to meet your needs? \$ \_\_\_\_\_ (base) \$ \_\_\_\_\_ (bonus) per year

12. If you close, you may not leave until after 2:00 in the morning (weekdays around 12:30 AM). Are you willing to support this requirement? .....  Yes  No

13. Why are you applying for a position with us? \_\_\_\_\_

\*14. What are your interests outside of the food/restaurant industry? \_\_\_\_\_

\*15. Do you have any schedule obligations (e.g., annual trips, vacations, weddings, reserve duty, or holidays) coming up that we need to know about?.....  Yes  No  
If yes, please indicate specific dates. \_\_\_\_\_

16. If hired, what notice do you need to give your current employer? \_\_\_\_\_  
When would you be available to start? \_\_\_\_\_

17. Please indicate any days or hours you are regularly unavailable.

	M	T	W	TH	F	S	SU
<b>NOT AVAILABLE</b>							

18. Please provide us your most recent typical schedule.

	M	T	W	TH	F	S	SU
<b>HOURS TYPICALLY WORKED</b>							

### EDUCATIONAL HISTORY

Please complete the information requested below regarding your educational qualifications.

	High School	College/University	Professional/Other
<b>School Name and Location</b>	Name _____ City _____ State _____	Name _____ City _____ State _____	Name _____ City _____ State _____
<b>Number of Years Attended</b>			
<b>Diploma/Degree Received</b>			
<b>Describe Course of Study</b>			
<b>Describe any job-related specialized training, apprenticeship, and extracurricular activities.*</b>			
<b>Describe any honors you have received.*</b>			

\*You may omit any information indicating legally protected characteristics.

## EMPLOYMENT HISTORY

Please complete the information requested below regarding your work history. Please do not write "See Résumé."

	Current or Most Recent Employer	Previous Position	Previous Position
<b>NAME OF EMPLOYER</b> (If restaurant, note type: fast food, owner-operated, multi-unit, full-service.)			
<b>ADDRESS/LOCATION</b>			
<b>NAME AND POSITION OF SUPERVISOR</b>	Name _____ Position _____	Name _____ Position _____	Name _____ Position _____
<b>POSITION(S) HELD</b> (If in a management position, please indicate length of time in this position.)			
<b>TOTAL ANNUAL COMPENSATION</b> (when left or leaving this position)	Base _____ Bonus _____	Base _____ Bonus _____	Base _____ Bonus _____
<b>LENGTH OF EMPLOYMENT</b>	From    ____ / ____ Mo.    Yr. To       ____ / ____ Mo.    Yr.	From    ____ / ____ Mo.    Yr. To       ____ / ____ Mo.    Yr.	From    ____ / ____ Mo.    Yr. To       ____ / ____ Mo.    Yr.
<b>PLEASE DESCRIBE YOUR ROLE IN TRAINING OTHER PEOPLE</b>			
<b>POSITIONS MANAGED</b>			
<b>NUMBER OF EMPLOYEES MANAGED</b>			
<b>IF YOU WERE/ARE A SUPERVISOR OR MANAGER, INDICATE THE TASKS THAT YOU PERFORMED</b>			
<b>INDICATE HOW MANY NEW STORE OPENINGS YOU HAVE BEEN INVOLVED IN AND DESCRIBE YOUR ROLE</b>	# of NSOs _____ Role _____	# of NSOs _____ Role _____	# of NSOs _____ Role _____
<b>AVERAGE NUMBER OF HOURS WORKED PER DAY/WEEK</b>	Day _____ Week _____	Day _____ Week _____	Day _____ Week _____

Please continue your employment history on the back of this page.

**EMPLOYMENT HISTORY (Continued)**

	<b>Current or Most Recent Employer</b>	<b>Previous Position</b>	<b>Previous Position</b>
<b>ANNUAL TURNOVER PERCENTAGE FOR HOURLY EMPLOYEES</b>			
<b>WEEKLY SALES VOLUME</b>			
<b>BUDGETED/ACTUAL FOOD COST</b>	Budgeted _____ Actual _____	Budgeted _____ Actual _____	Budgeted _____ Actual _____
<b>BUDGETED/ACTUAL LABOR COST</b>	Budgeted _____ Actual _____	Budgeted _____ Actual _____	Budgeted _____ Actual _____
<b>AVERAGE LIQUOR AND FOOD SALES</b>	Liquor _____ Food _____	Liquor _____ Food _____	Liquor _____ Food _____
<b>DESCRIBE ANY WORK-RELATED AWARDS, ACHIEVEMENTS, PROMOTIONS</b>			
<b>PLEASE LIST ANY COMPUTER SKILLS</b>			
<b>REASON FOR LEAVING</b>			
<b>HOW MUCH NOTICE GIVEN</b>			

**Optional: Emergency Contact Information**

Please list the person we should contact in case of an emergency. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE READ CAREFULLY**

I certify that the information given herein is true and complete. I authorize you to make such investigations and inquiries of the information provided herein, and other matters related thereto, as may be necessary. I hereby release employers, schools and other persons, institutions, or businesses from all liability in responding to inquiries in connection with this Application. I understand that false or misleading information given in this Application or during interviews may result in a refusal to hire or discharge in the event of employment.

I understand and agree that, if hired, my employment is at will. I also understand that if I am hired my employment is for no definite period of time. I may terminate my employment at any time and I may be dismissed at any time without prior notice. I further understand and agree that nothing in this Application form shall constitute a contract of employment or shall constitute a contract or a guarantee of employment.

I also understand that any policies or procedures implemented by the company in the event of my employment are for purposes of operations only and are not intended to be nor constitute a contract for my employment. In addition, I understand that any of these policies or procedures may be changed at any time at the employer's discretion and without notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I understand that my application will remain active for 45 days from the date received.

**Attention: All HOURLY applications must be returned to an Outback restaurant. All MANAGEMENT applications must be returned to a Joint Venture Partner. (Please DO NOT submit a MANAGEMENT application to an Outback restaurant.)**