JoJo's Cookie Company, LLC, Employment Application

A person with a disability or handicap requiring accommodation for completing the application process should notify the Human Resources Manager or hiring point of contact as soon as possible.

			App	olicant	Information			
Full Name:					Date:			
	Last		First		M.I.			
	(s), if any, under which orked or attended schoo	l:					Date(s):	
		Last		First		М.І.	` ` `	
Address:	Street Address							Apartment/Unit #
	Sireel Address						•	Apartment/Onit #
	City					State		ZIP Code
Phone:					Email			
Date Availab	ole:	Social	Security	y No.:		Des	ired Salary	:\$
Position App	olied for:							
Are you lega United State	ally authorized to work ins?	the	YES	NO				
Have you ev	ver worked for this comp	any?	YES	NO	If yes, when?			
Are you at lea	ast 18?		YES	NO				
	ver been convicted of a ny felony charges pend ?		YES	NO				
so, when did	ach such matter, pleas d your incarceration be ny other information yo	gin and hov	v long o	did it las	st; your present sta	atus (awaitir	ng trial, pro	
	record is not necessari n into account.	ly a bar to e	mployr	ment; fa	actors such as the	age and na	ture of offe	nse and rehabilitation
In what lang	uages, if any, are you flo	uent?						
Emergency	Contact (Name, Addres	s, Telephone	Numb	er, Rela	ationship to You):			

				Education	
High School:					
	YES	NO			
College:					
Did you graduate?	YES	NO	Degree:		
Other:				Address:	
Did you graduate?	YES	NO	Degree:		
				References	
Please list three profes	ssional	referen	ces.		
Full Name:					Relationship:
A days as a					Phone:
Full Name:					Relationship:
Company					Phone:
Address:					
Full Name:					Relationship:
					Phone:
Address:					
Commonw				revious Employment	Dhanai
A days as a					Phone: Supervisor:
				Ending Salary:	
Responsibilities:					
From:		To:_		Reason for Leaving:_	
May we contact your pr	evious	supervis	or for a refere	YES NO nce?	
If the contact informatio	n for yo	ur super	visor is differe	ent than above, please provide their	new contact information:

Company:	Phone:
Address:	Supervisor:
Job Title: Starting	Salary: <u>\$</u> Ending Salary: <u>\$</u>
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for a reference?	YES NO
If the contact information for your supervisor is different than a	pove, please provide their new contact information:
Company:	<u> </u>
Address:	Supervisor:
Job Title: Starting	Salary: <u>\$</u> Ending Salary: <u>\$</u>
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for a reference?	YES NO
If the contact information for your supervisor is different than a	pove, please provide their new contact information:
Militar	y Service
Branch:	From: To:
Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	
Disclaimer	and Signature
This application will only be considered for the ninety calend LLC. ("JCC"). Should you wish to be considered after the ex	
be terminated by JCC or myself at any time, regardless of or without cause and with or without any previous notice, up	/ment and compensation is at will and that my employment can the time and manner of payment of my wages and salary, with nless otherwise indicated in written agreement with JCC. I also nodify and/or terminate any policies, practices, procedures, and

3

I understand that any prior representations, promises, contracts, or statements made by or on behalf of JCC regarding my

at will employment status are expressly superseded by the foregoing paragraph. (please initial)_

standards it has adopted or implemented, to the extent not limited by law. I acknowledge that no JCC employee or representative has either the power or authority to enter into any agreement for employment for any specified period of time, or to make any representations or agreements contrary to any of the foregoing, unless that agreement is in writing and

signed by JCC Management. (please initial)

I certify that the information given herein is true and complete to the best of my knowledge. I understand and agree that JCC may require me to undergo a background investigation, including but not limited to my credit report, employment history, criminal history, driving record, and other personal history provided in this Application. I authorize JCC to investigate both my work and personal history and verify all data given on this Application, on related papers, and in interviews. I authorize all individuals, schools, and employers named herein, except as specifically limited on this application, to provide information requested, and I release them from damages in providing this information. I also release JCC of any claimed liability arising out of such response and disclosure. I waive any written notice of the release of such records that may be required by any state or federal law. I understand and agree that any falsification, misrepresentation, or omission of fact, either on this application or during the pre-hire process, will be reason for (1) my not being offered employment or (2) dismissal at any time from the service of JCC if employed. (please initial)
Screening tests for alcohol and controlled substance use may be required before hiring and during employment with JCC. I authorize JCC to conduct alcohol and controlled substance testing of me, and agree to provide blood and/or urine specimens for alcohol and/or drug-screening analysis. (please initial)
I am not bound by, and agree not to make, any agreement, oral or written, that is in conflict or prohibits in any way employment with JCC. I will not violate any agreement with or the rights of any third party. If hired by JCC, I certify that when acting within the scope of my employment (or otherwise on behalf of JCC), I will not use or disclose any JCC customer/client confidential information or intellectual property (collectively, "Restricted Materials"), except as expressly authorized by JCC in writing. Further, I have not retained anything containing or reflecting any confidential information of a prior employer or other third party, whether or not created by me. (please initial)
I hereby agree not to commence any action or suit (whether statutory, common law, federal, state or otherwise) relating to any employment with JCC more than six (6) months after the date of termination of such employment or the accrual of the cause of action whichever is earlier, and waive any statute of limitations to the contrary. (please initial)
JCC is an Equal Opportunity Employer and complies with all applicable laws prohibiting discrimination on the basis of race, ethnicity, color, age, sex (including pregnancy), national origin, religion, citizenship, disability, height, weight, familial status, veteran status, marital status, genetic information, whistleblower status, or any future protected category. JCC will work with the job applicant or employee with a disability to accommodate his or her ability to perform the essential functions of the job, unless the accommodations would impose an undue hardship on the employer. Under Michigan Law, a disabled person must notify JCC in writing of the need for accommodation within 182 days after the date the disabled person knew or reasonably should have known that an accommodation was needed. (please initial)
Signature: Date: