



EMPLOYMENT APPLICATION

As an EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER, ARAMARK does not discriminate against applicants or employees because of their age, race, color, religion, national origin, sex (except where sex is a bonafide occupational qualification) or on any other basis prohibited by law. Furthermore, ARAMARK will not discriminate against any applicant or employee because he or she is mentally or physically disabled, a disabled veteran, or a veteran of the Vietnam era, provided he or she is qualified and meets the requirements established by ARAMARK for the job.

PLEASE TYPE OR PRINT CLEARLY Print on line above words

				/	/
				DATE	
NAME	(Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER () () ()	
CURRENT ADDRESS	(Street)	(City)	(State)	(ZIP)	PHONE NUMBER () () ()
RESIDENT ADDRESS <small>(If different from above)</small>	(Street)	(City)	(State)	(ZIP)	PHONE NUMBER
ARE YOU 18 YEARS OR OLDER?	<input type="radio"/> YES	<input type="radio"/> NO	IF NO, STATE YOUR DATE OF BIRTH / /		

TYPE OF POSITION DESIRED

FULL TIME PART TIME SUMMER TEMPORARY OTHER

POSITION OR LOCATION			SALARY EXPECTED
WILL YOU TRAVEL?	WILL YOU RELOCATE?	TO WHAT AREA?	DATE AVAILABLE TO WORK
<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO		
HAVE YOU EVER WORKED FOR ARAMARK?	<input type="radio"/> YES <input type="radio"/> NO	IF YES, WHEN AND WHERE?	
HAVE YOU EVER APPLIED TO ARAMARK?	<input type="radio"/> YES <input type="radio"/> NO	IF YES, WHEN AND WHERE?	

To comply with the Immigration Reform and Control Act of 1986, if you are hired you will be required to provide documents to establish your identity and your authorization to be employed in the United States. Such documents will be required within the first three (3) business days following your hire, or upon your first work day if your employment period will be less than three (3) days.

HOW WERE YOU REFERRED TO ARAMARK?

ARE YOU WILLING TO TAKE A PHYSICAL EXAM AT OUR EXPENSE IF THE NATURE OF THE JOB REQUIRES ONE? YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME (MISDEMEANOR OR FELONY)? YES NO

IF YES, EXPLAIN IN SPACE BELOW.

PLEASE NOTE THAT BACKGROUND CHECKS ARE PERFORMED.

WHERE	WHEN	CHARGED	SENTENCE
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Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.



EMPLOYMENT APPLICATION

PLEASE TYPE OR PRINT CLEARLY Print on line above words

EDUCATION RECORD

HIGH SCHOOL

DID YOU GRADUATE?

YES NO

NAME (last attended) ADDRESS

DEGREE/DIPLOMA RECEIVED OR EXPECTED MAJOR/MINOR FIELDS OF STUDY

COLLEGE/ UNIVERSITY

DID YOU GRADUATE?

YES NO

NAME ADDRESS

DEGREE/DIPLOMA RECEIVED OR EXPECTED MAJOR/MINOR FIELDS OF STUDY DATES ATTENDED(MM/YY - MM/YY)

GRADUATE SCHOOL

DID YOU GRADUATE?

YES NO

NAME ADDRESS

DEGREE/DIPLOMA RECEIVED OR EXPECTED MAJOR/MINOR FIELDS OF STUDY DATES ATTENDED(MM/YY - MM/YY)

OTHER (BUSINESS, TECHNICAL, SECRETARIAL, ETC.)

DID YOU GRADUATE?

YES NO

NAME ADDRESS

DEGREE/DIPLOMA RECEIVED OR EXPECTED MAJOR/MINOR FIELDS OF STUDY DATES ATTENDED(MM/YY - MM/YY)

LIST ANY CLUBS, ORGANIZATIONS, SOCIETIES OR PROFESSIONAL GROUPS TO WHICH YOU BELONG THAT HAVE A DIRECT BEARING UPON YOUR QUALIFICATIONS FOR THE JOB THAT YOU ARE SEEKING. (INDICATE AMERICAN DIETETIC ASSOCIATION REGISTRATION NUMBER IF APPLICABLE TO THE POSITION FOR WHICH YOU ARE APPLYING.)

LIST ANY HOBBIES OR INTERESTS THAT HAVE A DIRECT BEARING ON THE JOB FOR WHICH YOU ARE APPLYING.

LIST ANY SPECIAL SKILLS OR ABILITIES THAT DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.

DO YOU POSSESS A VALID CURRENT DRIVER'S LICENSE (ONLY FOR JOBS REQUIRING DRIVING A VEHICLE)? YES NO

DRIVER'S LICENSE NUMBER AND STATE

MILITARY SERVICE RECORD

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES? YES NO

IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE THAT DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.



PLEASE TYPE OR PRINT CLEARLY Print on line above words

EXPERIENCE RECORD

1. **MOST RECENT**

EMPLOYER'S NAME		NAME AND TITLE OF SUPERVISOR ()
EMPLOYER'S ADDRESS		PHONE NUMBER
STARTING POSITION	STARTING SALARY	EMPLOYED FROM (MM/YY) TO (MM/YY)
ENDING POSITION	ENDING SALARY	REASON FOR LEAVING

2. **NEXT MOST RECENT**

EMPLOYER'S NAME		NAME AND TITLE OF SUPERVISOR ()
EMPLOYER'S ADDRESS		PHONE NUMBER
STARTING POSITION	STARTING SALARY	EMPLOYED FROM (MM/YY) TO (MM/YY)
ENDING POSITION	ENDING SALARY	REASON FOR LEAVING

3. **NEXT MOST RECENT**

EMPLOYER'S NAME		NAME AND TITLE OF SUPERVISOR ()
EMPLOYER'S ADDRESS		PHONE NUMBER
STARTING POSITION	STARTING SALARY	EMPLOYED FROM (MM/YY) TO (MM/YY)
ENDING POSITION	ENDING SALARY	REASON FOR LEAVING

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? YES NO

IF NO, INDICATE ABOVE BY NUMBER WHICH ONE(S) YOU DO NOT WISH US TO CONTACT

USE THIS SPACE TO DESCRIBE ANY PREVIOUS WORK HISTORY AND/OR TO DETAIL PARTICULAR JOB RESPONSIBILITIES LISTED ABOVE. INCLUDE ANY ADDITIONAL INFORMATION THAT YOU FEEL MAY BE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING.

STUDENTS: PLEASE LIST CLASS SCHEDULE OR AVAILABILITY BELOW



EMPLOYMENT APPLICATION

This application shall remain active for 60 days. After 60 days, if you are still interested in employment at ARAMARK, you must fill out a new application.

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand and agree that any misrepresentation or omission of facts in my application may be justification for refusal to hire, or termination of employment.

I further understand that an investigative report maybe made as to my character and general reputation. I authorize all past employers, schools, persons and organizations having relevant information or knowledge to provide it to ARAMARK or its duty authorized representative for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application. Upon written request by me, within a reasonable period of time, ARAMARK will make available to me the nature and scope of all reports of every type obtained.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between ARAMARK Corporation, its subsidiaries and affiliates, and me for either employment or for the providing of any benefit. If an employment relationship is established, I understand that my employment can be terminated, with or without cause, at the option of either ARAMARK or myself.

In signing this form, I certify that I understand all the questions and statements in this application.

Further, if granted a position with ARAMARK Corporation or any of its subsidiaries, I will comply with ARAMARK's BUSINESS CONDUCT POLICY, a summary of which is printed below.

THIS POLICY APPLIES WORLDWIDE

Compliance with Laws

It's ARAMARK's policy to comply with the laws in each country in which ARAMARK conducts business.

Employment/Equal Opportunity

ARAMARK's policy is to hire, promote, discipline and make all other personnel decisions without regard to race, color, religion, national origin, age, sex, disability, disabled veteran or Vietnam-era veteran status except where bonafide affirmative action programs allow for such considerations.

Sexual Harrassment

Sexual Harrassment in any form will not be tolerated in the workplace. Any employee who feels that he or she has been subjected to sexual harrassment is required to report the incident immediately.

Illegal Substance

It's ARAMARK's policy to maintain an environment free of drug and alcohol abuse.

Environmental

ARAMARK's policy to comply with environmental laws in all countries in which ARAMARK conducts business.

Collusion

It is fundamental that ARAMARK independently determine the pricing, commissions and other contractual terms offered to clients or prospective clients.

Copyright Infringement

It is ARAMARK's policy to respect copyrights own others.

Political Contributions

Any political contribution or expenditure by a component is against ARAMARK policy. Also, any reimbursement of an employee for any such contribution or expenditure is against ARAMARK policy.

Gifts and Entertainment

It is ARAMARK's policy not to make any gift (other than a nominal holiday remembrance), or provide entertainment (except routine lunches or dinners during the conduct of regular business), to any government or union employee (except as provided in the BUSINESS CONDUCT POLICY). Gifts given to non-government or non-union employees are restricted to a value of up to \$200 (U.S.) per year; where entertainment is involved, lavish expenditures are to be avoided.

Gifts from any supplier or client to an ARAMARK employee may not total more than \$200 (U.S.) per year.

Accurate Books and Reporting

All transactions must be accurately recorded. No unrecorded fund, asset or other improper account of ARAMARK shall be established or maintained for any reason.



BUSINESS

CONDUCT POLICY

Conflicts of Interest/Related Party Transactions

It is essential that all ARAMARK employees avoid any situation or interest that might interfere with his/her judgment concerning responsibilities to ARAMARK.

Outside Employment

An ARAMARK employee's outside employment should not conflict with his/her responsibilities to ARAMARK.

Finder's Fee

Payment of a finder's fee is prohibited without the written approval of the General Counsel's Office.

Disclosure

If you are aware of possible violations of the BUSINESS CONDUCT POLICY, you must report them to the BUSINESS CONDUCT POLICY SECRETARY c/o the Office of General Counsel, at Corporate Headquarters in writing or by telephoning 1-800-999-8989 extension 3246, or 212-238-3246, or to others listed in the policy book.

(MIDDLE)

(FIRST)

SIGNATURE OF APPLICANT

DATE

For Personnel Use Only

DATE APPLICATION RECEIVED

REFERRAL SOURCE

INTERVIEWED BY

DEPARTMENT

REFERENCE CHECK COMPLETED (DATE AND BY WHOM)

DISPOSITION AND REASON

APPLICANT'S NAME (LAST)



SELF-IDENTIFICATION FORM FOR APPLICANT FLOW DATA

It is the policy of ARAMARK Corporation to provide equal employment opportunity to all employee applicants for employment without regard to race, color, religion, sex, national origin, age, disability or disabled or Vietnam-era veterans status.

VARIOUS AGENCIES OF THE UNITED STATES GOVERNMENT REQUIRE EMPLOYERS TO COLLECT INFORMATION ON APPLICANTS. INFORMATION REQUESTED ON THIS SHEET IS FOR PURPOSES OF COMPLIANCE WITH THESE RECORD KEEPING REQUIREMENTS AND TO DETERMINE RECRUITING AND EMPLOYMENT PATTERNS. If you wish to be identified, please provide any of the information requested on this form that you would like to submit. You may submit this information now or at any time in the future. Such information will in no way affect the decision regarding your application for employment. This sheet will be kept confidential and maintained separately from your application form.

Completion of this sheet is voluntary and is not a requirement for employment.

NAME

DATE

POSITION APPLIED FOR

RACE:

- WHITE
- BLACK
- HISPANIC
- ASIAN OR PACIFIC ISLANDER
- AMERICAN INDIAN/ALASKAN NATIVE

SEX:

- FEMALE
- MALE

Please return this form with your completed Employment Application to your Human Resources Representative. Thank You.

ARAMARK

BACKGROUND INQUIRY RELEASE

I understand that an investigative background inquiry is to be made on myself including, but not limited to, consumer credit history, criminal history, driving history, and other reports. These reports may include information as to my character, work habits, job performance, and experience, along with reasons for termination of past employment. I further understand that information will be requested from various Federal, State, and other agencies, which may maintain records concerning my past activities relating to my driving, credit performance, criminal conduct, civil court, and other experiences.

I authorize, without reservation, any party or agency contacted to furnish the above information.

I hereby consent to your obtaining the above information. And, I further understand that, to aid in the proper identification of my file or records, I am providing the following information, as well as any other information that may be required at a later date.

Print Name: _____

AKA and/or Maiden Name: _____

Soc. Sec.: _____ Date of Birth _____

Driver's License#: _____ State Issued: _____

Current Address: _____

City/State/Zip: _____

Previous Address: _____

City/State/Zip: _____

Applicant's Signature: _____ Date: _____