
Job Duties and Responsibilities

Reason for Leaving

Next Most Recent Employer

Employed From	Employed To	Job Title	Starting Salary	Ending Salary
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Employer Name	Employer Address	Supervisor's Name	Supervisor's Phone
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Other Information

Volunteer Activities (list organization, type of service, dates)

Hobbies, Interests (optional)

Certification and Authorization

- The above information is true and correct.
- As a contracted employee, I understand that I am not eligible for any type of insurance benefits or worker's compensation claims. I agree to release The Food Academy, LLC from all liability and retain all liability.
- I agree to not bring any lawsuits or legal actions against The Food Academy, LLC.
- I agree to maintain confidentiality of, but not limited to, company processes, procedures, menus, services, recipes, invoices, intellectual property, physical property, ideas, events, name, and logo.
- I agree that I am not authorized and will not act on the company's behalf unless authorization is formally granted by a company owner or manager.
- I agree to refrain from branding any outside company, political agenda, service, etcetera.
- I hereby acknowledge that I have read and agree to the company terms and policies.

Printed Full Name

Signature

Date