

CATERING FORM

CONTACT PERSON: \_\_\_\_\_ FAX # \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

ORGANIZATION \_\_\_\_\_ TAX EXEMPT \_\_\_\_\_

NUMBER OF PEOPLE \_\_\_\_\_ ADULTS \_\_\_\_\_ CHILDREN \_\_\_\_\_

BULK \_\_\_\_\_ INDIVIDUALLY PACKAGED \_\_\_\_\_

PICKUP \_\_\_\_\_ DELIVER \_\_\_\_\_ SETUP \_\_\_\_\_ SERVE \_\_\_\_\_

DATE NEEDED \_\_\_\_\_ TIME \_\_\_\_\_

PRODUCT REQUESTED \_\_\_\_\_ AMOUNT NEEDED \_\_\_\_\_

CHICKEN \_\_\_\_\_

BISCUITS \_\_\_\_\_

COLESLAW \_\_\_\_\_

MASHED POTATOES \_\_\_\_\_

BAKED BEANS \_\_\_\_\_

MACARONI & CHEESE \_\_\_\_\_

POTATO SALAD \_\_\_\_\_

CRISPY STRIPS \_\_\_\_\_

HOT WINGS \_\_\_\_\_

POTATO WEDGES \_\_\_\_\_

OTHER \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# PAYROLL DEDUCTION ORDER FORM

Company Name/Nombre de la Compania: \_\_\_\_\_

Unit/ Unidad: \_\_\_\_\_ Date/Fecha: \_\_\_\_\_

Unit Manager/Gerente de la unidad: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Work Telephone Number: ( )    -      
 Numero de Telephono Area Code/Prefijo

Fax Number/Numero de fax: ( )    -      
 Area Code/Prefijo

Employee's Full Name (please print)  
 Nombre completo del Empleado: \_\_\_\_\_

Employee's Social Security #  
 Numero de Seguro Social:    -   -

Shoe Style/ Width/ Size/ Price/  
 Estilo del Zapato: Ancho: Numero: Precio: \$ \_\_\_\_\_

Add appropriate sales tax for FL & CA  
 Por favor incluir impuestos de venta correspondientes a FL y CA. \$ \_\_\_\_\_

Add to Price of Shoes/Ascoja uno para el precio de los zapatos:  
 Regular 10 day-2 week delivery/Regular 10 Dias a 2 semanas \$4.50 \$ \_\_\_\_\_

SFC Express 3-5 Business Day delivery  
 SFC Entrega Rapida 3-5 Dias de trabajo - \$5.50 \$ \_\_\_\_\_

**KEY CODE**  
 Very Important  
 See purple box on  
 back page of catalog

Total Cost/Suma Total: \$ \_\_\_\_\_

## SHOES FOR CREWS™ Voluntary Shoe Purchase Agreement

I do hereby authorize the Company to deduct the balance owed on my shoe purchase following the Payroll Departments receipt of the SHOES FOR CREWS invoice.

If I terminate my position prior to the SHOES FOR CREWS purchase being paid in full, I authorize the Company to deduct the unpaid balance from my final paycheck.

Be advised, it is the employee's responsibility to return shoes to the SHOES FOR CREWS warehouse if a shoe size change or refund is desired.

THIS IS A VOLUNTARY PROGRAM AND  
 IS NOT A CONDITION OF EMPLOYMENT  
 WITH THE COMPANY.

Employee's Signature \_\_\_\_\_

## ZAPATOS PARA EQUIPOS™ Acuerdo Voluntario De Compra

Por medio de esto autorizo la compania a deducir el balance debido de la compra de mis zapatos de mi proxima pago o hasta que el balance sea pagado en su totalidad.

Si mi posicion anterior es eliminada yo autoize a mi empleador para que dedusca la cantidad de mi ultimo cheque.

Yo estoy de acuerdo de que es mi responsabilidad el devolver los zapatos a la compania ZAPATOS PARA EQUIPOS warehouse si deoco devolucion de dinero o cambio en el tamano de los zapatos.

ESTA ES UNA COMPRA VOLUNTARIA Y  
 NO ES UNA CONDICION PARA EMPLEO  
 CON LA COMPANIA.

Firma del Empleado \_\_\_\_\_

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Firma del Empleado \_\_\_\_\_



PERFORMANCE REPORT

TO: \_\_\_\_\_ Date: \_\_\_\_\_

BE ADVISED THAT YOU ARE BEING:

- Commended
  - Documented
  - Disciplined
- Warned \_\_\_\_\_ Laid Off \_\_\_\_\_ Discharged \_\_\_\_\_  
There will be \_\_\_\_\_ warnings prior to discharge.

FOR REASON(S) OF:  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_

EMPLOYEE STATEMENT:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_



# C.H.A.M.P.S. ALERT -- KFC Base

Restaurant ID: \_\_\_\_\_

Date: \_\_\_\_\_

Day: \_\_\_\_\_

MOD is accountable for completion of this form. Note any item that needs correction and indicate action taken. Monitor Product Quality, Hospitality, and Speed with Service continuously throughout shift.

Today's Recognized Champions: \_\_\_\_\_

Food Safety is number 1 priority at KFC. Be alert and correct problems immediately. MOD is responsible to assure all standards are followed.

## MOD Equipment Check Prior to Opening

Calibrated to the correct temperature, clean, and in good repair

Thermometers Calibrated	Y	N	Chicken Cooler	o	Vegetable Cooler	o	Freezer	o
Walk-ins: Cooler (33-40°F) / Freezer (-5° to +5°F)			Record Oldest Kill Date					
Chicken within Kill Date			Cold units temperature (coldwell, reach-in, salad case: 33-40°F)	o	Reach-in	o	Reach-in	o
Cold units temperature (coldwell, reach-in, salad case: 33-40°F)			Upright (180° +/- 2 degrees F) -- Water in Moist Cabinet	(WC1)	(WC2)	(WC3)	(WC4)	Sajad
Hot units (hotwell water = 180°F; drawers = 180°F; display water = 150°F)			Hotwells	Drawers	Display			
Hot water available at sinks -- Bunn water at least 190° F	Y	N	Bunn					
All Chicken products - 165° F minimum temperature at end of cook cycle verified (check first round of all fryers/ovens used)	CCP		OF 1	o	OF 2	o	PF 1	o
Shortening visibility greater than 3" and not smoking (Record Y/N)			OF 1	o	OF 2	o	OF 3	PF 1
DT Speaker (sound clear, correct volume level)	Y	N						PF 2

## MOD Food Safety Check Prior to Lunch & Dinner

Food Safety:

	Before Lunch	Before Dinner	Action Taken
Employees -- not ill/uniforms clean/proper grooming/no gum or smoking	Initial	Initial	
Hats/blue bandages/disposable gloves used correctly			
Kitchen floors, walls, lights, drains clean - no evidence of pests			
3 compartment sink set up correctly -- 200 ppm quat sanitizer			
Hand sink hot water at least 100° F, approved soap, sanitizer, and paper towels. No missed hand washing.			
Only approved cleaners used, labeled, and stored correctly			
No cross contamination observed - blue/yellow towels used correctly			
No expired or unapproved ingredients used			
Flour sifted / water discarded after each round			
Temperature of fryers/ovens checked & shows "Drop/Load" when product added - product not removed until cycle ends			
Microwave/Steamer heated products - 165° F temp verified			

## Product Quality - 3x (Temp / Quality / Hold Time)

(For Quality: A = Acceptable; U = Unacceptable)  
Y/N for Hold Time Marked and Within Guidelines

	Before Lunch	Before Dinner	After Dinner	CCP = Critical Control Point
Original Recipe (140° F)	Temp / Quality / Hold	Temp / Quality / Hold	Temp / Quality / Hold	Action Taken
EC / H&S (140° F)	% / /	% / /	% / /	
Crispy Strips (140° F)	% / /	% / /	% / /	
BBQ Mixture (140° F)	% / /	% / /	% / /	
Cole Slaw (33-40° F)	% / /	% / /	% / /	
Macaroni & Cheese (140° F)	% / /	% / /	% / /	
Tender Roast Filets (140° F)	% / /	% / /	% / /	
Popcorn Chicken (140° F)	% / /	% / /	% / /	
Dipping/Hot Wings (140° F)	% / /	% / /	% / /	
Green/Baked Beans (140° F)	% / /	% / /	% / /	
Mashed Potatoes / Gravy (140° F)	% / /	% / /	% / /	
Corn on the Cob / Rice (140° F)	% / /	% / /	% / /	
Shortening Visibility (3" minimum in all fryer -- Check after afternoon polishing)	Yes	No		

## MOD Rush Ready and Recovery Checks - 4x

Food Safety:

	Before Lunch	After Lunch	Before Dinner	After Dinner	Action Taken
Parking Lot, Sidewalks, and Landscaping (no trash, in good repair)	Initial	Initial	Initial	Initial	Exterior:
Outside Trash Cans & Dumpster (not overflowing, gates closed)					
DT Order and Pick-up areas (back door, landscaping, DT window)					
Exterior Lighting, Windows, Doors, Sills, Thresholds, Entryways					Interior:
Dining Room/Lobby Floors, Walls, and Lights (no evidence of pests)					
Dining Room Booths, Tables and Chairs, Interior Trash Cans					
Front Counter, Menuboards, Self-Serve Counters ( <del>must be</del> stocked)					
Restrooms (clean/odor free, antibacterial soap, toilet paper, towels/dryer)					

Signature (MOD)\* \_\_\_\_\_

Date \_\_\_\_\_

Signature (MOD)\* \_\_\_\_\_

Date \_\_\_\_\_

# Application for Employment



POSITION APPLIED FOR \_\_\_\_\_ DATE OF APPLICATION \_\_\_/\_\_\_/\_\_\_

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
Last First M.I.

ADDRESS \_\_\_\_\_  
Street City State Zip Code

TELEPHONE ( ) \_\_\_\_\_ \* Date of Birth \_\_\_/\_\_\_/\_\_\_

Area Code \*Age must be provided. It will be used to meet Federal laws concerning equipment operating restrictions.

Have you ever been employed here before? .....  
 YES  NO

Are you legally eligible for employment in this country?.....  
 YES  NO

Date available for work \_\_\_/\_\_\_/\_\_\_

Type of employment desired:  Full Time  Part-Time  Temporary  Seasonal  Other

<b>EMPLOYMENT</b>	Please start with your present or most recent employer
-------------------	--

1 --

Company Name	Telephone ( )
Address	From: To:
Name of Supervisor	Weekly pay
Job Title	Reason for Leaving

2 --

Company Name	Telephone ( )
Address	From: To:
Name of Supervisor	Weekly pay
Job Title	Reason for Leaving

3 --

Company Name	Telephone ( )
Address	From: To:
Name of Supervisor	Weekly pay
Job Title	Reason for Leaving



# Termination

Last Name \_\_\_\_\_

First \_\_\_\_\_

Middle I. \_\_\_\_\_

Termination Effective Date \_\_\_\_\_

STORE: \_\_\_\_\_

Time \_\_\_\_\_

EMPLOYEE # \_\_\_\_\_

Mail Pay?  Yes  No

## Reason for Separation (check one)

- Resignation (attach letter of resignation)  Indefinite Layoff  Dismissal for Cause  Reduction in Force
- Other (explain below)  Contract Expiration (explain below)  No Show No Call

## Employee Evaluation (Check appropriate boxes)

	UNSATISFACTORY	FAIR	SATISFACTORY	GOOD	EXCELLENT
Attendance					
Cooperation					
Initiative					
Job Knowledge					
Quality of Work					

Rehire Recommendation

- Without reservation  
 Would not recommend

With some reservation

Service Letter Issued?

- Yes (attach copy)  No

Severance Pay?  No

Yes

Date(s): \_\_\_\_\_

Amount(s): \_\_\_\_\_

Additional Comments: \_\_\_\_\_

MANAGEMENT SIGNATURE: \_\_\_\_\_