## Foreign Chef Employment Application "Specific Reasons and Positive Benefits" Supplemental Explanation

| Item | Explanation | Remarks |
| :---: | :---: | :---: |
| Applicant Entity |  | Company Name |
| Restaurant <br> Business <br> Address | $\begin{aligned} & 1 . \\ & 2 . \\ & 3 . \end{aligned}$ | Please list 2 or more business locations separately and indicate restaurant name. |
| Business Status | Established: Month Year |  |
| Personnel Status | Total company employees: <br> Restaurant department employees: <br> ( see <br> attached schedule for details ) <br> Actual food preparation staff in kitchen: <br> No. of employed foreign chefs prior to this application: | 1. Based on number of personnel registered for labor insurance. <br> 2. Food preparation staff does not include cleaning or field service staff. |
| Type of Cuisine | Thai $\square$ Indian $\square$ Japanese $\square$ French American Other: |  |
| Restaurant Business Space and Capacity | Square meters: Customer service capacity: |  |
| Restaurant Revenue for 3 Most Recent Years(For example, this year is Year 2016, then fill in the revenue or turnover of Year 2013, 2014, 2015) | Oyears: NT\$ <br> Oyears: NT\$ <br> Oyears: NT\$ | Non-restaurant business scope not included in calculation |
| Specific <br> Reasons and Positive |  |  |


| Benefits of <br> Employing <br> Foreign Chef |  |  |
| :--- | :--- | :--- |
| Current <br> Application's <br> Foreign Chef <br> Salary | Monthly Salary NT\$ <br> Allowance, bonus, or other: |  |
|  | If extension, please fill out the following fields <br> (Recent 3 years): <br> O〇〇years total annual salary: NT\$ |  |
|  | OOOyears total annual salary: NT\$ <br> OOOyears total annual salary: NT\$ |  |

The aforementioned filled-out by this company and confirmed correct.
Company seal:
Company owner seal:

Schedule
【Full Company Designation and Restaurant Name】 Employee Roster

| Department | Position or Job <br> Title | Name | ID Card No. | Began <br> Employment <br> Month/Year |
| :---: | :---: | :---: | :---: | :---: |



