

Employment Application

APPLICANT DATA

How were you referred to us: _____ Date: _____

Full Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone:() _____ Cell: _____ Salary Requirement: _____

Do you currently attend school? Yes No.....If yes, where? _____

Do you plan to attend school within next semester? Yes No

Are you currently employed? Yes No.....If yes, where? _____

What is your availability to work? _____

Are you willing to deliver pizza? Yes No

Do you have your own vehicle? Yes No

Is your vehicle in good conditions? Yes No

Do you carry valid auto insurance? Yes No

Are you over 18 years of age? Yes No.....If no, employment is subject to verification of age.

Are you a citizen of the United States? Yes No

If not, are you legally allowed to work in the U.S.A.? Yes No

Have you ever pleaded "guilty", "no contest", or been convicted of a crime? Yes No

If yes, give dates and details: _____

Please list any additional training or skills: _____

EDUCATION

School	Name and Location of School	Course of Study	Years Completed	Did you graduated?	Degree or Diploma
HIGH SCHOOL					
TRADE/TECHNICAL					
COLLEGE					

REFERENCES

Please list the names of three persons (not relatives) whom you have known at least one year.

Name	Address or phone number	Business	Years Acquainted
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FORMER EMPLOYERS

Please start with the most recent employer.

Name of Previous Employer: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

Employed from (month/year): _____ to: _____ Name of Supervisor: _____

Starting Salary: _____ Leaving Salary: _____ May we contact this employer? Yes No

Job Title: _____ Description of Job Duties: _____

Reason for Leaving: _____

Name of Previous Employer: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

Employed from (month/year): _____ to: _____ Name of Supervisor: _____

Starting Salary: _____ Leaving Salary: _____ May we contact this employer? Yes No

Job Title: _____ Description of Job Duties: _____

Reason for Leaving: _____

Name of Previous Employer: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

Employed from (month/year): _____ to: _____ Name of Supervisor: _____

Starting Salary: _____ Leaving Salary: _____ May we contact this employer? Yes No

Job Title: _____ Description of Job Duties: _____

Reason for Leaving: _____

AUTHORIZATION

I certify that the information contained in this application is factual, true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be grounds for immediate dismissal.

I authorize investigation of all statements contained herein and the references and employees listed herein to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from the utilization of such information.

I also understand and agree that no representative of the company has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

Signature _____ Date _____