



Quite Extraordinary Pizza™

APPLICATION FOR EMPLOYMENT

Our company is an equal opportunity employer, which prohibits discrimination in employment on the basis of race, sex, religion or national origin. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

Personal:

Date _____

Name _____ Home Phone _____

LAST

FIRST

MIDDLE

Present Address _____

NO.

STREET

CITY

STATE

ZIP

Social Security Number _____ Are you over 18? Yes No

Are you a citizen of the U.S. or do you have the legal right to be employed in the United States? Yes No

Have you ever been convicted of any crime (excluding minor traffic violations) including DWI? Yes No

If yes, state the offense, location, date and disposition _____

Who should be contacted in case of an emergency? _____

RELATIONSHIP

NAME

STREET ADDRESS/STATE

HOMEPHONE

Driver's License: State _____ Number _____ Type _____

Employment Desired:

Are you seeking: Full-time part-time Temporary / summer employment

Position applied for _____ Salary desired _____

Date available to start _____

Have you ever applied to our company before? Yes No

Have you ever worked for our company before? Yes No

If your answer to either of the above questions is yes, state when and where you applied and / or worked _____

How did you learn of our company and / or position? _____

Are you now or do you expect to be engaged in any other business or employment? Yes No

Are there any days or hours you would be unable or unwilling to work? Yes No

If yes, please specify those days _____

Work History:

List names of employers in consecutive order with present or last employer first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

| | | | | |
|-----------------------|--------------------|--------------------------|------------|----------|
| Name of Employer | | Dates Employed | | Pay |
| Address | | From: | To: | Starting |
| City, State, Zip Code | | Mo. _____ | Mo. _____ | \$ _____ |
| Telephone | Nature of Business | Year _____ | Year _____ | Ending |
| () | | | | \$ _____ |
| Title | | | | |
| Duties | | Reason for leaving _____ | | |
| | | _____ | | |
| | | _____ | | |

| | | | | |
|-----------------------|--------------------|--------------------------|------------|----------|
| Name of Employer | | Dates Employed | | Pay |
| Address | | From: | To: | Starting |
| City, State, Zip Code | | Mo. _____ | Mo. _____ | \$ _____ |
| Telephone | Nature of Business | Year _____ | Year _____ | Ending |
| () | | | | \$ _____ |
| Title | | | | |
| Duties | | Reason for leaving _____ | | |
| | | _____ | | |
| | | _____ | | |

| | | | | |
|-----------------------|--------------------|--------------------------|------------|----------|
| Name of Employer | | Dates Employed | | Pay |
| Address | | From: | To: | Starting |
| City, State, Zip Code | | Mo. _____ | Mo. _____ | \$ _____ |
| Telephone | Nature of Business | Year _____ | Year _____ | Ending |
| () | | | | \$ _____ |
| Title | | | | |
| Duties | | Reason for leaving _____ | | |
| | | _____ | | |
| | | _____ | | |

If you worked in any of your previous positions under another name, please give that name. _____

Are you presently employed? Yes No

If yes, may we contact your present employer? Yes No

Education

Name, Address and Location

Dates

Graduate?

Courses Studied

| | | | |
|--------------|--------------|---|----------|
| High School | From: To: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Diploma: |
| College | From: To: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Degree: |
| Trade School | From: To: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Diploma: |

If you did not graduate, why did you leave high school or college? _____

Are you planning to pursue further studies? Yes No

If so, when, where and what courses? _____

List any other scholastic honors, offices held and activities involved in during high school and college

List and describe any other School or Specialized Training _____

Military:

Have you ever served in the military? Yes No

Service Branch _____ Date Entered _____

Date Separated _____ Final Rank _____

Were you separated with any degree of disability? If so, what degree? _____

Are you a member of a reserve organization? Yes No

References (give three references, not relatives or former employers)

| Name | Address | Phone | Occupation |
|------|---------|-------|------------|
| | | | |
| | | | |
| | | | |

Health:

Do you have any physical or mental defects or illness that may limit your ability to perform the particular job for which you are applying? _____

Yes No If yes, describe _____

Date of last physical exam _____ Results _____

Have you ever been injured on the job? Yes No If yes, describe

| Nature of Injury | Employer when Injured | Year | Cause of Injury |
|------------------|-----------------------|------|-----------------|
| | | | |
| | | | |
| | | | |

Will you abide by the safety rules of this company? Yes No

Are you willing to take a physical exam or a drug screen at the company's expense? Yes No

Have you ever received treatment for alcohol or drug use? Yes No

Have you used any illegal drug, including marijuana, in the last twelve months? Yes No

Days lost in the last two years due to illness _____

Reason _____

Special Skills:

Do you type? Yes No If yes, words per minute _____

Have you had any computer word processing experience or training? Yes No If yes please describe:

What languages do you speak fluently? _____

Use the space below to describe why you are interested in working for our company and to list those skills and abilities which you feel particularly qualify you for a position with us. If you need more space, please continue on a separate sheet

I authorize investigation of all statements contained in this application. I understand that any misleading or incorrect statements will render this application void, and if employed, would be cause for termination. I further agree that the company shall not be liable in any manner if my employment is terminated because of falsity of statements, answers or omissions made by me in this application.

SIGNATURE

DATE