

# EMPLOYMENT APPLICATION

West End Pizzeria, INC. is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status, sexual orientation, marital status, or any other status protected under local, state or federal laws.

Days Available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Lunch							
Dinner							

Please print clearly. Use blue or black ink.

Position(s) Applied For \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

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

How Did You Hear About Us? \_\_\_\_\_

Are you legally eligible to work in the United States? \_\_\_\_\_

Are you 18 years or older? \_\_\_\_\_

Have you ever applied to West End Pizzeria, INC before? \_\_\_\_\_

*(If yes, please give date)*

Have you ever been convicted of a felony? \_\_\_\_\_

*(A conviction will not necessarily disqualify you)*

If yes, please explain \_\_\_\_\_

Is anyone related to you employed by West End Pizzeria, INC.? \_\_\_\_\_

If yes, please give their name and relationship to you \_\_\_\_\_

What salary or rate of pay do you expect? \_\_\_\_\_

Have you ever been fired or asked to resign from a job? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

On what date would you be available to work? \_\_\_\_\_

## EDUCATION

Elementary \_\_\_\_\_

High School \_\_\_\_\_

College / Vocational \_\_\_\_\_

Graduate \_\_\_\_\_

**EMPLOYMENT HISTORY (most recent first) (use back of paper for more room.)**

**Company** \_\_\_\_\_

Dates of employment \_\_\_\_\_ Starting/ending pay \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Describe your responsibilities \_\_\_\_\_  
\_\_\_\_\_

May we contact your supervisor? \_\_\_\_\_

**Company** \_\_\_\_\_

Dates of employment \_\_\_\_\_ Starting/ending pay \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Describe your responsibilities \_\_\_\_\_  
\_\_\_\_\_

May we contact your supervisor? \_\_\_\_\_

**Company** \_\_\_\_\_

Dates of employment \_\_\_\_\_ Starting/ending pay \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Describe your responsibilities \_\_\_\_\_  
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May we contact your supervisor? \_\_\_\_\_

**Company** \_\_\_\_\_

Dates of employment \_\_\_\_\_ Starting/ending pay \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Describe your responsibilities \_\_\_\_\_  
\_\_\_\_\_

May we contact your supervisor? \_\_\_\_\_

**REFERENCES:** Please list three professional references.

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

**APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION**

*\*PLEASE READ CAREFULLY BEFORE SIGNING\** I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery. I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by West End Pizzeria, INC. that such employment with the company is at will, for no specified duration and may be terminated by either the company or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of the company or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of the company except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of West End Pizzeria, INC. In consideration for employment with the company, if employed, I agree to conform to the rules, regulations, policies and procedures of the company at all times and understand that such obedience is a condition of employment. I understand that due to the nature of the company business, attendance and punctuality are considered essential requirements of every job at West End Pizzeria, INC. and that poor attendance or tardiness will result in disciplinary action. I understand that if offered a position with the company, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these preemployments tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. I also understand that if offered a position with West End Pizzeria, INC., I will have a 90-day probation period. I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to West End Pizzeria, INC. and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information. I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application. By signing below, I acknowledge that I have read, understood and agree to the above statements.

I certify that I do not have any detectable amounts of prohibited substances in my system at the time of taking my pre-employment drug screen. I understand that if my drug screen turns out positive for a prohibited substance, I will not be eligible for hire, or if I am hired pending the outcome of such a test, I will be subject to immediate termination...

\_\_\_\_\_  
Signature

Date \_\_\_\_\_