



Bellacino's

Pizza & Grinders

APPLICATION FOR EMPLOYMENT

Note: All applicants will be considered without regards to race, color, religion, sex, national origin, age, marital or veteran status, disability or any other basis prohibited by applicable state or federal law:

PERSONAL INFORMATION	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME
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LAST:	FIRST:	MI:	DATE:
ADDRESS:	CITY:	STATE:	ZIP:
SOCIAL SECURITY #:	ARE YOU? 14 - 15 16 - 17 18 or older (If under 18, proof of age must be provided prior to hiring)		
TELEPHONE:	DATE AVAILABLE FOR WORK:		
Is your citizenship or immigration status such that you can lawfully work in the U.S.?			Yes No

Please complete this chart with the times you are available to work. Check available anytime.

DAYS & HOURS AVAILABLE TO WORK	FROM:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		TO:						

EMPLOYMENT HISTORY: (List below the last three employers, beginning with your most recent)

COMPANY:	TELEPHONE:	YOUR POSITION:
ADDRESS:	DUTIES:	
DATES EMPLOYED:	SUPERVISOR:	SUPERVISOR TITLE:
REASON FOR LEAVING:	EARNINGS (Starting/Ending)	

COMPANY:	TELEPHONE:	YOUR POSITION:
ADDRESS:	DUTIES:	
DATES EMPLOYED:	SUPERVISOR:	SUPERVISOR TITLE:
REASON FOR LEAVING:	EARNINGS (Starting/Ending)	

COMPANY:	TELEPHONE:	YOUR POSITION:
ADDRESS:	DUTIES:	
DATES EMPLOYED:	SUPERVISOR:	SUPERVISOR TITLE:
REASON FOR LEAVING:	EARNINGS (Starting/Ending)	

EDUCATION	Name & Address of School	# of Years Attended	Did You Graduate?	Major Course of Study
High School:				
College:				
Other:				

CHARACTER REFERENCES: Give 3 references who are not relatives or former employers.

Name:	Occupation:	Years Known:	Phone:
Name:	Occupation:	Years Known:	Phone:
Name:	Occupation:	Years Known:	Phone:

OTHER

HAVE YOU EVER BEEN CONVICTED OF A CRIME (OTHER THAN MINOR TRAFFIC VIOLATIONS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	LIST ALL CONVICTIONS, SHOWING OFFENSE AND DATE:
IN YOUR PRIOR EMPLOYMENT, HAVE YOU HAD SHORTAGE OR MISUNDERSTANDINGS ABOUT MERCHANDISE OR FUNDS?	<input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE FULLY:
HAVE YOU EVER BEEN TERMINATED FROM A JOB OR ASKED TO RESIGN?	<input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, LIST DATES AND EXPLAIN:

EMERGENCY INFORMATION: (In case of emergency, please notify)

NAME:	TELEPHONE:	RELATIONSHIP:
ADDRESS:	CITY:	STATE: ZIP:

PLEASE READ BEFORE SIGNING

This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATION AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AN I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I GIVE THE EMPLOYER THE RIGHT TO CONTACT AND OBTAIN INFORMATION FROM ALL REFERENCES, EMPLOYERS, EDUCATIONAL INSTITUTIONS AND TO OTHERWISE VERIFY THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION."

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date _____