

# NICOLA PIZZA, INC.

Employment Application

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
City State Zip

PERMANENT ADDRESS:

\_\_\_\_\_  
City State Zip

PHONE NUMBER:

(Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ Birthdate: \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

POSITION DESIRED: \_\_\_\_\_ DATE AVAILABLE: \_\_\_\_\_

ARE YOU LEGALLY ELIGIBLE FOR WORK IN THE U.S.: Yes  No

AVAILABLE:  Seasonal  Part Time  Permanent Part Time

HAVE YOU APPLIED FOR EMPLOYMENT HERE BEFORE: Yes  No

WILL YOU WORK OVERTIME IF ASKED: Yes  No

OTHER SPECIAL TRAINING OR SKILLS: \_\_\_\_\_

EDUCATION:

# of Years Completed

Major

High School

\_\_\_\_\_

\_\_\_\_\_

College

\_\_\_\_\_

\_\_\_\_\_

BEGINNING WITH MOST RECENT – PLEASE LIST PAST EMPLOYERS:

Company Name: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address:

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Pay Start \_\_\_\_\_ Pay Last \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Job Title \_\_\_\_\_

Job description: \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company Name: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Pay Start \_\_\_\_\_ Pay Last \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Job Title \_\_\_\_\_

Job Description: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Pay Start \_\_\_\_\_ Pay Last \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Job Title \_\_\_\_\_

Job Description: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**REFERENCES: (Please list three references, name, address and phone number)**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Have you ever been convicted of a crime: Yes  No

If yes, please describe in full: \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date