



# STEVE'S PIZZA

## EMPLOYMENT APPLICATION

R.C. Pizza, INC. dba Steve's Pizza

In order for you to be considered for employment, this application must be filled out in its entirety. Resumes, though certainly welcome, should not be submitted in lieu of information requested below.

**PLEASE PRINT OR TYPE** Today's Date \_\_\_\_\_

\_\_\_\_\_

*First Name*      *MI*      *Last Name*      *Preferred Name/Nickname*

\_\_\_\_\_

*Street Address*      *Apt #*      *City*      *State*      *Zip Code*

\_\_\_\_\_

*Home Phone*      *Alternate/Work Phone*      *Email Address*

**PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION**

**Are you interested in:**       Full Time       Part Time       Temporary

**What schedule would you prefer?**       Weekdays       Weekends       Evenings       Nights

**How did you hear about the position?**       Friend (Name)       Internet

**Position Desired** \_\_\_\_\_      **Desired Pay:**    Hourly Pay      \$ \_\_\_\_\_

**When are you able to start work?**      Date: \_\_\_\_\_

**How many hours per week do you expect to work?** \_\_\_\_\_

*R.C. Pizza, INC DBA Steve's Pizza is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, R.C. Pizza, INC DBA Steve's Pizza complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. R.C. Pizza, INC DBA Steve's Pizza also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.*

**PLEASE CHECK YES OR NO TO THE FOLLOWING:**

**Are you authorized to work in the United States?**  Yes  No

Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, R.C. Pizza, INC DBA Steve's Pizza will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.

**Have you ever been convicted of a felony which has not been annulled or sealed by a court?**  Yes  No If yes, please explain below.  
 (Convictions will not necessarily exclude you from employment, but date and type of conviction may be considered for job placement.)

**Are you under 18 years of age?**  Yes  No

If yes, can you furnish a work permit?  Yes  No

**Are you capable of performing the essential functions of the job for which you are applying with or without a reasonable accommodation?**  Yes  No

**WORK SCHEDULE AVAILABILITY**

What shifts/hour are you available to work? We have shifts from 7:00 AM to 12:00AM (Please list hours in each AM/PM box)

SHIFT	MON	TUES	WED	THUR	FRI	SAT	SUN
AM	TO	TO	TO	TO	TO	TO	TO
PM	TO	TO	TO	TO	TO	TO	TO

**PLEASE CHECK YES OR NO TO THE FOLLOWING:**

**Are you willing to work split shift?**  Yes  No

**Are you willing to work holidays/Weekends?**  Yes  No

**Are you willing to stay late in an emergency?**  Yes  No

**EDUCATION:**

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			

**PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)**

COMPANY NAME			YOUR POSITION and TITLE		
FROM ____ / ____ Month      Year	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION		
CITY		STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER	
TYPE OF BUSINESS			STARTING PAY \$	FINAL PAY \$	
TO ____ / ____ Month      Year	TELEPHONE NUMBER (      )		TERMINATION ____ VOLUNTARY ____ INVOLUNTARY		REASON
BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION					

COMPANY NAME			YOUR POSITION and TITLE		
FROM ____ / ____ Month      Year	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION		
CITY		STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER	
TYPE OF BUSINESS			STARTING PAY \$	FINAL PAY \$	
TO ____ / ____ Month      Year	TELEPHONE NUMBER (      )		TERMINATION ____ VOLUNTARY ____ INVOLUNTARY		REASON
BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION					

COMPANY NAME			YOUR POSITION and TITLE		
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CITY		STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER	
TYPE OF BUSINESS			STARTING PAY \$	FINAL PAY \$	
TO ____ / ____ Month      Year	TELEPHONE NUMBER (      )		TERMINATION ____ VOLUNTARY ____ INVOLUNTARY		REASON
BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION					

**REFERENCES: Please list three professional references**

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

**PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION**

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

***I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.***

References: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications. Also, I understand that the company may investigate my driving record and my criminal record.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client. I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

**SIGNED:**

**DATE:**

\_\_\_\_\_

\_\_\_\_\_