

Pandora's Pies

Employment Application

Equal Opportunity Employer

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS. BACKGROUND CHECKS MAY BE CONDUCTED.

PERSONAL INFORMATION:

First Name _____

Middle Name _____

Last Name _____

D.O.B _____

Street Address _____

City, State, Zip Code _____

Phone Number _____ E-mail address _____

Are you eligible to work in the United States?

Yes _____ No _____

If you are under age 18, do you have an employment/age certificate?

Yes _____ No _____

Have you been convicted of or pleaded no contest to a felony within the last five years?

Yes _____ No _____

If yes, please explain: _____

POSTION

Please check the position(s) you are applying for:

Server _____ Kitchen _____ Manager _____

Please list any skills, special training, or work experience pertinent to the position you are applying for?

AVAILABILITY:

When can you start? _____

If accepted, how long do you plan to work here?

Number of desired hours per week

During School Year: _____ During Breaks: _____

Do you have any prior commitments to another employer that could become a hindrance?

Yes _____ No _____

If yes please explain.

Would you be able to work one weekend night until 3am every weekend?

Yes _____ No _____

Days/Hours Available (*Fill in hours below for each day*)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

EMPLOYMENT HISTORY: (Please list at least 2)

Present Or Last Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____ Email: _____

Position Title: _____ From: _____ To: _____

Responsibilities: _____

Salary: _____

Reason for Leaving: _____

Would you go back: _____

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____ Email: _____

Position Title: _____ From: _____ To: _____

Responsibilities: _____

Salary: _____

Reason for Leaving: _____

Would you go back: _____

REFERENCES: (Please list at least 3)

Please list their name, title, and relation to you.

“I certify the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.”

Date: _____

Signature: _____