



EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) applied for:	Date: _____	
<input type="checkbox"/> Driver	<input type="checkbox"/> Prep/Cook	
<input type="checkbox"/> Counter/Cashier	<input type="checkbox"/> Supervisor	<input type="checkbox"/> Other: _____
How did you learn about this position?		
<input type="checkbox"/> Newspaper Advertisement	<input type="checkbox"/> www.foxspizzafairfield.com	<input type="checkbox"/> Employee: _____
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other: _____

PERSONAL			
Name _____			
(Last)	(First)	(Middle)	
Address _____			
(Street)	(City)	(State)	(Zip Code)
Telephone _____		Social Security Number _____	
(Area Code)			
Email: _____			
Are you legally entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been convicted of a felony in the last seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain: _____ _____	

JOB INTERESTS/SKILLS			
Have you applied for a position here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____			
Type of employment requested: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary			
Availability: <input type="checkbox"/> Mornings <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays			
Date you could begin working: _____		Salary/Wage Desired: _____	
Summarize any other special skills or qualifications: _____ _____ _____ _____			

EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

1. Name of Employer _____
 Address _____
 (Street) (City) (State) (Zip Code)
 Supervisor and Title _____ Your Title _____
 Employed From _____ To _____ Starting Salary _____ Ending Salary _____
 Work Performed _____

 Reason for leaving _____

2. Name of Employer _____
 Address _____
 (Street) (City) (State) (Zip Code)
 Supervisor and Title _____ Your Title _____
 Employed From _____ To _____ Starting Salary _____ Ending Salary _____
 Work Performed _____

 Reason for leaving _____

3. Name of Employer _____
 Address _____
 (Street) (City) (State) (Zip Code)
 Supervisor and Title _____ Your Title _____
 Employed From _____ To _____ Starting Salary _____ Ending Salary _____
 Work Performed _____

 Reason for leaving _____

EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	COURSE OF STUDY	# OF YEARS	GPA	DEGREE, DIPLOMA, CERTIFICATE AND HONORS RECEIVED
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
OTHER EDUCATION					

REFERENCES (NO RELATIVES OR FORMER EMPLOYEES)

Name	Company / Organization	Title / Relationship	Daytime Phone

DELIVERY DRIVERS ONLY

If you are employed by North Cincy Pizza, LLC as a delivery driver then you are required to provide proof of personal auto liability insurance and drivers license. In addition, your motor vehicle report will be checked, at the time of application and periodically thereafter, to verify your driving eligibility. **We will need your date of birth to run a motor vehicle report.** You are responsible for maintaining any costs incurred on your car while employed here. North Cincy Pizza, LLC will not be held responsible for any loss, theft, or, damage to your vehicle and its contents while employed.

Minimum age requirement is 18. Date of Birth: _____

Insurance Company: _____ Policy Expiration Date: _____

Have you had at least one-year driving experience? Yes No

Have you been involved in a traffic accident in the last 3 years? Yes No

If yes, please explain: _____

Have you received any speeding tickets or other traffic violations in the last 3 years? Yes No

If yes, please explain: _____

Has your driver's license ever been suspended or revoked? Yes No

If yes, please explain: _____

ADDITIONAL INFORMATION (OPTIONAL)

State any additional information you feel may be helpful to us in considering your application:

ACKNOWLEDGEMENT

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired.

I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. Verification of eligibility to work in the United States must be satisfied for an offer to be made.

I authorize the company to hire an agency to conduct a background check to verify the information I have provided.

I acknowledge that is hired, I will be an at-will employee. I will be subject to dismissal or discipline without notice or cause, at the discretion of the employer. I also understand that this means I am free to quit my employment at any time, for any reason, without notice. I understand that no representative of the company, other than James Mathias or Ben Spinks, has the authority to change the terms of an at-will employment and that any such change can occur only in a written employment contract

Applicant's Signature _____ Date _____