

PIRRO'S RESTAURANTE

Employment Application

Personal Data

First Name Middle Last

Street Address City State Zip Code

Home Telephone Number Social Security Number Today's Date

Daytime Telephone Number at which we may contact you

Are you 18 years of age or older? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

If "yes", please explain:

How were you referred to PIRRO'S? Please circle the number of the most appropriate response.

1 2 3 4
Employee Ad No Other:
Referral;
Walk-In

Position Preferences

For what position are you applying? _____

Salary desired: \$ _____ per _____ (specify hour, week or year)

Schedule desired: Full Time ___ Part Time ___ # of Hours Per Week _____

Could you work overtime? Yes ___ No ___

What date could you start work? _____

Education

High School

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

College

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

List any certificates earned or in progress, and/or any additional training programs not included in your formal education.

Previous Employment

List your current or most recent employment first. Include work related internships, military and volunteer work.

Current Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Title: _____
Reason for Leaving: _____
Salary: _____ per Hour Week Month Year (circle one)
Dates of Employment: From: _____ To: _____
May We Contact Your Employer: Yes ___ No ___

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Title: _____
Reason for Leaving: _____
Salary: _____ per Hour Week Month Year (circle one)
Dates of Employment: From: _____ To: _____
May We Contact Your Employer: Yes ___ No ___

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Title: _____
Reason for Leaving: _____
Salary: _____ per Hour Week Month Year (circle one)
Dates of Employment: From: _____ To: _____
May We Contact Your Employer: Yes ___ No ___

Professional References

Name	Title	Company	Phone	Professional Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Applicant's Signature Date