

# Ed & Joe's Restaurant & Pizzeria

## Please Read and Follow the Directions:

Thank you for your interest in working with us. We think you will find our approach to hospitality to be different from that of other operators in the market and we think this is the secret of our success. We are not just another food service company, and we are not looking for just another job applicant. We value experience, but we are more interested in what you can learn than in what you know and people skills are essential.

Please print out our application and be sure to fill it out completely, if a question does not apply to you, mark it "NA" so we know you didn't avoid the answer.

On the last page of the application, we give you the opportunity to make a personal "sales pitch." We suggest you give it some thought and present a case for yourself. After all, if you don't believe in you, why should we?



# Application for Employment

## ABOUT YOU

Name \_\_\_\_\_ Nickname \_\_\_\_\_

Social Security No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Cell Carrier \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If you listed a cell phone above, how often do you check for text messages? \_\_\_\_\_

Do you have reliable transportation to meet any scheduled shift? \_\_\_\_\_

Can you read at a 6th grade level? \_\_\_\_\_ Have you been convicted of a felony? \_\_\_\_\_ If yes, give details on last page.

Have you ever worked for us before? \_\_\_\_\_ If so, under what name? \_\_\_\_\_

Do you have any friends or relatives working for us? \_\_\_\_\_ Who? \_\_\_\_\_

Can you provide proof that you are over 18 years old? \_\_\_\_\_ ...over 21 years old? \_\_\_\_\_ Are you a smoker? \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ License No. \_\_\_\_\_

Have you had any accidents or moving violations in the past three years? \_\_\_\_\_ If yes, please provide details on last page.

Have you ever been bonded? \_\_\_\_\_ Is there any reason why you could not be bonded? \_\_\_\_\_ If yes, describe on last page.

Do you have a legal right to work in the U.S.? \_\_\_\_\_ Can you provide documentation of your legal right to work? \_\_\_\_\_

Is there any reason why you could not perform all physical aspects of this job (including the ability to lift up to 50 lbs.)? \_\_\_\_\_ If yes, please provide details on last page.

Is additional information concerning change of name necessary to check work or education records? \_\_\_\_\_ If yes, explain. (continue on last page if necessary)

Describe your use of drugs and alcohol: (continue on last page if necessary)

## ABOUT THE JOB

For what position are you applying? \_\_\_\_\_ Salary Requirement: \$ \_\_\_\_\_ per \_\_\_\_\_

Would you accept another position? \_\_\_\_\_ If so, which one? \_\_\_\_\_

Which do you prefer?  full time work  part time work. If part time, about how many hours per week? \_\_\_\_\_

Which will you accept?  full time work  part time work

When could you start working for us **full time**? \_\_\_\_\_ When are you **NOT** available to work for us full time?

MON	TUE	WED	THU	FRI	SAT	SUN
<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning
<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon
<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening
<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime

When could you start working for us **part time**? \_\_\_\_\_ When are you **NOT** available to work for us part time?

MON	TUE	WED	THU	FRI	SAT	SUN
<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning
<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon
<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening
<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime	<input type="checkbox"/> can work anytime

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# ABOUT YOUR WORK EXPERIENCE

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(PLEASE START WITH YOUR MOST RECENT POSITION)

Resume Attached?  YES  NO

COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

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No. Supervised: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Final Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments:

COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

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No. Supervised: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Final Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments:

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## MORE ABOUT YOUR WORK EXPERIENCE

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COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

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No. Supervised: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Final Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Co-worker's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Subordinate's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments:

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## ABOUT YOUR EDUCATION

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HIGH SCHOOL \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Graduated? \_\_\_\_\_

No. Yrs. Completed \_\_\_\_\_ Major \_\_\_\_\_ Verification Phone (\_\_\_\_) \_\_\_\_\_

COLLEGE \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Degree \_\_\_\_\_

No. Yrs. Completed \_\_\_\_\_ Major \_\_\_\_\_ Verification Phone (\_\_\_\_) \_\_\_\_\_

GRAD SCHOOL \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Degree \_\_\_\_\_

No. Yrs. Completed \_\_\_\_\_ Major \_\_\_\_\_ Verification Phone (\_\_\_\_) \_\_\_\_\_

Extracurricular activities:

Other training programs completed:

Professional memberships and certifications:

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## OTHER COMMENTS

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Why would you be a good choice for this position?

I certify the information above is complete and accurate to the best of my knowledge. I authorize the individuals, companies and agencies concerned to provide this company and its agents with all information necessary to verify the statements I have made in this application and I release them from any liability for so doing. I understand I must receive satisfactory references from previous employers, co-workers and subordinates (if any) before an offer of employment can be made. I understand that incomplete or unsigned applications will not be considered and that false, incomplete or misleading statements are grounds for my immediate discharge. I understand that any offer of employment is contingent upon my passing a prescribed physical examination, proving my identity and documenting my right to work. I understand these policies cannot be changed except in writing.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_