

APPLICATION FOR EMPLOYMENT



A Slice of New York is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, national origin, the presence of mental, physical or sensory disability, sexual orientation, or any other basis prohibited by federal or state law.

PERSONAL INFORMATION (Please Print)

Name: Last _____ First _____ Middle _____ Social Security Number _____ Date (MM/DD/YYYY) _____

Other names you are known by: _____ Are you over 18 years of age? Yes ___ No ___ (A Slice of New York is required to comply with federal/state law.)

Are you legally eligible for employment in the U.S.? Yes ___ No ___ (Proof of U.S. citizenship or immigration status will be required if hired for the position.)

Address: Street _____ City _____ State _____ Zip Code _____

Phone Number: _____ Email: _____ Referred by: _____

EMPLOYMENT DESIRED (If you are applying for an hourly position, please keep in mind that the availability of hours may vary)

Position: ASSOCIATE, will work all positions as needed Salary Desired: _____ Interested in Full-time: Yes / No (circle one)

Specify Hours Available for Each Day of the Week

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Desired hours per week: _____

Are you able to work overtime? Yes ___ No ___

Do you have reliable transportation? Yes ___ No ___ Some positions require lifting up to 50 lbs. Do you meet this requirement? Yes ___ No ___

EDUCATION

High School, College, Business or Trade School Attended <small>(Name and Location)</small>	# of Years Completed	Major/Minor Subject Studied	Did You Graduate?
High School	1 2 3 4		Y N
College	1 2 3 4		Y N
Business or Trade School	1 2 3 4		Y N

Please list skills relevant to the position you are applying for. _____

What do you like about pizza? _____

What does excellent customer service mean to you? Why is it important? _____

Why do you want to work at A Slice of New York? _____

PREVIOUS EMPLOYMENT

Please use this section to describe your work experience, starting with your most recent, or current employer. Please complete even if you attach a resume.

Dates Employed	Employer Information	Employment Type	Optional Salary Info
From	Business Name, Address & Phone Number	Type of Business	Starting Ending
To		Job Title	If hourly, number of hours per week
Full or Part Time?		Duties	
Reason for Leaving	Supervisor's Name and Title		

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Reason for Leaving	Supervisor's Name and Title		

REFERENCES

Please list the names of three references (at least one personal and one professional), whom you have known at least one year.

Name	Address & Phone Number	Business	Years Known
1.			
2.			
3.			

I hereby authorize A Slice of New York to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by A Slice of New York to provide any relevant information regarding my current and/or previous employment and release all persons, schools and employers of any and all claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that I am required to sign a confidentiality agreement should I become an employee of A Slice of New York. I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate that there is a position open and does not obligate A Slice of New York to hire me. I understand and agree that employment is at will, and that is to mean that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, by me or A Slice of New York. This application is current for 60 days. If you have not heard from the employer and still wish to be considered for employment, it will be necessary to submit a new application.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____

Date: _____