



Pizza Time Employee Application

Position desired _____

Date _____

Personal Information

Name _____

(Last)

(First)

(Middle)

Address _____

(street)

(apt)

(city)

(state)

(zip)

Phone (____) _____ S/S or ID Number _____ Are you 18 years old or older? _____

IN CASE OF EMERGENCY NOTIFY

Name _____

Address _____ Phone (____) _____

Have you ever been convicted of a felony? Yes No * A conviction will not necessarily prohibit you from being employed.

Describe _____

Employment Information

Position desired _____ Date you can start _____ Are you currently employed? _____

What hours can you work? _____ Number of hours you wish to work? _____

Circle days you wish to work: M T W TH F S S Note: All employees must work at least one weekend night.

Do you have any previous pizza or restaurant experience? _____ When _____ Where _____

Job Description? _____

Have you ever worked for Pizza Time? _____ When _____ Supervisor Name _____

Reason for leaving? _____

Do you have any physical impairments which would interfere with your ability to do the job for which you have applied? _____

Employment Record

Name and address of present or current employer _____

Phone (____) _____

Starting date _____ End Date _____ Starting pay _____ Ending pay _____

Name and title of supervisor _____

Job title _____ May we contact supervisor? Yes No

Reason for leaving _____

Description of work _____

Name and address of previous employer _____

Phone (____) _____

Starting date _____ End Date _____ Starting pay _____ Ending pay _____

Name and title of supervisor _____

Job title _____ May we contact supervisor? Yes No

Reason for leaving _____

Description of work _____

References

Name, address, and telephone number of three persons not related to you with whom you have been acquainted for at least one year:

1. _____
2. _____
3. _____

Vehicle

What type of vehicle do you own? Year _____ Make _____ Model _____

Driver's license # _____ State _____ License plate # _____ State _____

Insurance company _____ State _____ Effective date _____

Agent name / address / Phone _____

Amount of liability coverage _____ How often paid _____ Expiration date _____

List below all traffic violations within the last three years excluding parking violations. Include date, violation and penalty.

Employee / Driver Agreement

I have completed the above data regarding my driving record and represent that the above is complete and accurate. I authorize Pizza Time to obtain my MVR to verify the above. I understand that my record may be verified periodically at the company's discretion. I also understand that if my record does not meet company requirements, I can be terminated from my employment.

I understand that I must have liability coverage while I am driving for Pizza Time and that Pizza Time is not responsible for physical damage to my vehicle.

I understand the importance of safety and agree to the following safety policies while working:

1. To obey *all* traffic laws at all times. 2. To keep my car in safe working order and if it is not in good order, I understand that I can be taken off the road. 3. To wear my safety belt at all times. 4. To not eat or drink while driving. 5. To never drive after having consumed drugs or alcohol. 6. No persons other than *on-the-job* employees and authorized security personnel are permitted to ride in my delivery vehicle while making deliveries. 7. To bring my vehicle to a complete and safe stop any time I use a spotlight or lamp. 8. I understand that if management requires that I take a driver's safety class, failure to do so may result in termination of my employment. 9. To notify Pizza Time when I have received a ticket or have been arrested for any driving-related offenses. 10. To notify Pizza Time when my driving privileges have been suspended, revoked or restricted. 11. To notify Pizza Time when there has been any change in my car insurance. 12. To promptly report to my manager any incident involving the use of a car while I am working whether or not it results in any injury to any person or damage to any vehicle or other property, and regardless of who I believe is at fault. 13. To always drive courteously and practice defensive driving techniques. 14. To drive only the insured car listed above unless prior approval has been obtained. 15. I will be responsible for all equipment/uniforms issued to me by Pizza Time.

I have read and understood the above employee/driver agreement.

Signature _____ **Date** _____

I Certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, false statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein. I further authorize all listed references to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time for any reason without prior notice.

Signature _____ **Date** _____