



Willington Pizza

25 River Road (RTE. 32), Willington, CT 06279
(860)429-7433 / www.willingtonpizza.com

Any questions please feel free to contact us: willingtonpizza@gmail.com

APPLICATION FOR EMPLOYMENT

DATE: _____

NAME: _____

LAST

FIRST

MIDDLE

ADDRESS: _____

STREET

TOWN

STATE

ZIP

PHONE: _____

POSITION APPLIED FOR: _____

ARE YOU UNDER 18? _____

HAVE YOU FILED AN APPLICATION HERE BEFORE? YES NO DATE: _____

DO YOU HAVE LEGAL RIGHT TO WORK IN THE UNITED STATES? YES NO

ARE YOU AVAILABLE TO WORK? 10-25 hour 25-35 hours 35 or more hours

I AM AVAILABLE FOR THE FOLLOWING SHIFTS: ANY DAYS NIGHTS

I AM AVAILABLE TO WORK THE FOLLOWING DAYS: ANY _____ ONLY _____

ARE YOU PRESENTLY WORKING: YES NO

WHAT RATE OF PAY WOULD YOU DESIRE? \$ _____ per hour, WHEN CAN YOU START WORKING? _____

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 7 YEAR? YES NO

IF YES, EXPLAIN: _____

SPECIAL SKILLS: _____

ACTIVITIES (CIVIC, ATHLETIC, ETC.): _____

EDUCATION

HIGH SCHOOL: _____

YEARS COMPLETED:

9 10 11 12

YEAR GRADUATED: _____

CITY, STATE: _____

COLLEGE: _____

YEARS COMPLETED:

FR SO JR SR

YEAR GRADUATED: _____

CITY, STATE: _____

OTHER TRAINING: _____

PERSON TO CONTACT IN EMERGENCY:

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

PHONE: _____

WHY DO YOU WANT TO WORK FOR WILLINGTON PIZZA? _____

FORMER EMPLOYERS (List below last three employers, starting with last one first.)

	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES LIST TWO, DO NOT INCLUDE RELATIVES OR EMPLOYERS

1 _____

2 _____

DO YOU HAVE A FRIEND OR RELATIVE WORKING AT WILLINGTON PIZZA? _____

"I certify that all information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In considering my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than it's President, and then only when in writing and signed by the President, has the authority to enter into any agreement for employment for any specific period of time, or make any agreement contrary to the forgoing."

DATE _____ SIGNATURE _____