



# Employment Application

## Applicant Information

Equal access to employment is available to all persons. Those applicants requiring accommodations to the application and/or interview process should contact the General Manager. In consideration for employment, I agree to conform to Goodfella's Rules & Policies. **Goodfella's Pizzeria & Italian Restaurant is an Equal Opportunity Employer.**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (cell) \_\_\_\_\_ (home) \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary:\$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Describe any educational training that is relevant to the position you are applying for: \_\_\_\_\_

Are you currently employed?	YES	NO	If yes, may we contact your employer?	YES	NO
Are there any days/hours you will not work?	YES	NO	If yes, please detail:		
Do you require any personal time-off in the next (6) months?	YES	NO	If yes, please detail:		
Have you been convicted of a crime in the last (7) years?	YES	NO	If yes, please detail:		

## Previous Employment *\*List your last three employers, starting with the most recent first.*

1. Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

2. Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

3. Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I authorize Goodfella's to make investigations & inquiries of my personal & employment history. I hereby release Goodfella's from all liability that may result from such utilization of such information. I acknowledge that this application will remain active for (60) days from this date, and I also acknowledge that my employment with Goodfella's is temporary for the first (90) days and is for no specific term. I may be terminated at any time during or after my first (90) days with or without cause or notice.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In Case of Emergency, Please Contact: \_\_\_\_\_ Phone: \_\_\_\_\_