



340 State St. SE
Grand Rapids, MI 49503

EMPLOYMENT APPLICATION - COMPLETE ALL FIELDS rev/6/16

NOTE: ALL POSITIONS REQUIRE DAYTIME AND WEEKEND AVAILABILITY (unless specified otherwise)

Position applying for	Past Experience	Today's Date
<input type="radio"/> Driver	<input type="radio"/> Driver	
<input type="radio"/> Cashier	<input type="radio"/> Cashier	
<input type="radio"/> Pizza Maker	<input type="radio"/> Pizza Maker	
<input type="radio"/> Sub Maker	<input type="radio"/> Sub Maker	
<input type="radio"/> Management	<input type="radio"/> Management	
		SALARY DESIRED

HOURS DESIRED (ALSO COMPLETE AVAILABILITY ON REVERSE SIDE)

Full Time Part Time 38- 40 25-37 18-24
 Are you able to legally work in the USA? Yes No other (specify) _____

PERSONAL INFORMATION - All FIELDS MUST BE COMPLETED

FIRST NAME : _____ MIDDLE INT : _____ LAST: _____
 STREET ADDRESS: _____ APT#: _____
 CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____
 E-MAIL ADDRESS: _____
 MAIN PHONE # () CELLULAR # ()
 ALTERNATE EMERGENCY PHONE: () GPS on Cell Text on Cell
 SOCIAL SECURITY : _____ - _____ - _____ DRIVERS LIC#: _____
 DATE OF BIRTH: _____ ARE YOU 21 YEARS OF AGE OR OLDER ? Yes No

YOUR MOST RECENT EMPLOYERS - PLEASE LIST 3 (YOU MAY ALSO ATTACH A RESUME IF MORE THAN 3)

COMPANY: _____ ADDRESS: _____
 STATE; _____ PHONE; _____ SUPERVISOR: _____
 DATES OF EMPLOYMENT: FROM _____ TO _____ STATUS: Resigned Terminated OTHER
 REASON FOR LEAVING: _____
 COMPANY: _____ ADDRESS: _____
 STATE; _____ PHONE; _____ SUPERVISOR: _____
 DATES OF EMPLOYMENT: FROM _____ TO _____ STATUS: Resigned Terminated OTHER
 REASON FOR LEAVING: _____
 COMPANY: _____ ADDRESS: _____
 STATE; _____ PHONE; _____ SUPERVISOR: _____
 DATES OF EMPLOYMENT: FROM _____ TO _____ STATUS: Resigned Terminated OTHER
 REASON FOR LEAVING: _____

Education information

HIGH SCHOOL GRADUATE: YES NO IF YES WHAT HIGH SCHOOL: _____
 COLLEGE GRADUATE: YES NO WHAT COLLEGE? : _____
 ENROLLED AT SCHOOL? YES NO WHERE ? : _____

GENERAL INFORMATION

ARE THERE ANY HEALTH OR PHYSICAL LIMITATIONS OR ISSUES WHICH COULD AFFECT YOUR EMPLOYMENT?

YES NO IF YES EXPLAIN: _____

HOW IS THIS LIMITATION OR ISSUE MANAGED? _____

ARE YOU A SMOKER?: YES NO

HAVE YOU EVER CONVICTED OF A CRIME?: YES NO

IF YES, EXPLAIN: _____

ARE YOU A MEMBER OF A TEAM, CLUB, GROUP, OR ORGANIZATION?

BRIEFLY TELL US ABOUT IT _____

WHICH SOCIAL MEDIA DO YOU USE FREQUENTLY?:

FACEBOOK TWITTER SHAPCHAT INSTAGRAM OTHER _____

PERSONAL REFERENCES

NAME: _____ ADDRESS: _____

STATE; _____ PHONE; _____ RELATIONSHIP TO YOU: _____

OCCUPATION: _____ TIME YOU'VE KNOWN THEM: FROM _____ TO _____

NAME: _____ ADDRESS: _____

STATE; _____ PHONE; _____ RELATIONSHIP TO YOU: _____

OCCUPATION: _____ TIME YOU'VE KNOWN THEM: FROM _____ TO _____

NAME: _____ ADDRESS: _____

STATE; _____ PHONE; _____ RELATIONSHIP TO YOU: _____

OCCUPATION: _____ TIME YOU'VE KNOWN THEM: FROM _____ TO _____

WHAT ARE YOUR HOURS OF AVAILABILITY FOR WORK

AM/PM	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
FROM:							
TO:							

How did you hear about us?: Walk-in Ad Other Friend, if friend who? _____

I understand and agree that the information I have provided is accurate, and complete to the best of my knowledge. I also understand that giving false or incomplete information in any application or interview for employment shall be grounds for dismissal. I acknowledge that Grand Rapids Pizza and Delivery, may request information pertinent to my employment. I further understand that Grand Rapids Pizza and Delivery employees are employed at will and may be discharged at any time for any reason at the sole discretion of the company.

X _____ DATE: _____