

PIZZA KING Application For Employment



1.	Tell us a	bout yo	ourself							
VAME										
First		Middle			Last			SS#		
ADDRES	SS			· · · · · · · · · · · · · · · · · · ·	•		* *			
Street			City			State		Zip		
Phone					***************************************					
Number Emergency C				ontact				Phone		
				ere are any restrictions on your eligibility			'	Date of		
r right to work in the U.S. or the state of Virginia, please explain below o					vritten explar	nation.		Birth		
	n on an applicants eligibil on for employment.	ity or right to work	does not automat	tically disqua	ilify an applic	ant for further				
		ted pled quik	y or pled no	contact to	a folony	2 Vae	NO	A		
Have you ever been convicted, pled guilty or pled no configured for the first subject of the first subject subj									Are you willing to submit to a drug test?	
plea with location, date, and specific details.				it iciony com	leiony conviction, guilty plea or no contest			YES NO		
	and opcome					110110_				
NOTE:	A conviction for a crimin	nal offense does n	ot automatically di	isqualify an a	applicant from	n further consid	eration for en	nployment.		
2. V	Vhat Job D	o You V	Vant?					work?		
	applying for?									
OSIGOTI	applying for:			vvnat is tri	e maximun	n hours you ca	in work?	Minimum?		
Date you can start?				Availability						
,				/ Valiabilit	-	Tues We	d Thur	Fri Sat	Sun	
Type of position desired				From		. 400 770	<u> </u>	TH Out	Out	
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Part Time Full Time										
					Note: Team members may be required to work atleast one weekend night. keep working there if you work for Pizza King? Yes No					
no you o	arronay employed: 10	.3 140	Do you plan to	rech Moir	ing mere n	you work for i	rizza King r	res NO_		
1 E	ducation									
High School Lo			Location		Did you graduate? Yes No					
						If no, did you				
						earn a GED		No		
College			Location			Did you grad				
							Yes	No	_	
				······································	************	<u> </u>				
Are you i	n school now? Yes_	No	Do you plan	on returnir	ng? Yes_	No	If yes, w	hen?		
5. \	Where hav	ve vou	worke	d hef	ore?					
Dates		you work for?	Responsib				Doy Data	D (L-		
rom	Name	you work for?	Kesponsin	mues	Type o	f business		Reason for le	aving	
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	Phone				'		1			

Car details All personnel involved in product delivery for Pizza King must have their driving records reviewed before beginning employment and every 120 days thereafter. In addition, all team members must meet the following requirements: * No team member will be allowed to drive any vehicle for Pizza King without a valid driver's license. Individuals must show proof of and maintain auto liability insurance. All vehicles used for delivery or other company business must pass a safety inspection. * No one may be hired into a position which requires driving unless their driving record meets Pizza King standards, The expiration date on my current driver's license is: Name of auto insurance company: Expiration date: Have you been convicted of or pled guilty to any traffic offenses in the last three years? Yes_____ No If yes, list offense(s) and dates: Have you been invovled in any auto accidents in the past three years? Yes____ No____ If yes, list offense(s) and dates:_____ Do you have any charges pending against you for any traffic violations? Yes____ No____ If yes, please describe: Note: A yes answer does not automatically disqualify you from further consideration. Signature It is the desire of Pizza King to hire only those individuals who show a willingness to work as a team, be dedicated, responsible, and honest. We want a clean restaurant at all times. We want to make customer satisfaction our top priority. The employees we hire must be responsible and multi-disciplined. I UNDERSTAND THAT PIZZA KING AND THE COMPANY DO NOT WANT ME TO EVER SPEED OR DRIVE RECKLESSLY IN ANYWAY. I WILL REPORT ANY INSTRUCTIONS TO DO OTHERWISE TO THE PIZZA KING CORPORATE OFFICE. I AGREE TO OBEY THE FOLLOWING POLICIES WHILE WORKING: 1. To always drive courteously, safely, and follow defensive driving techniques while obeying all laws. 2. To notify the Company if there is any change in my car insurance. 3. To notify the Company if my driving privileges are restricted, suspended, or revoked, and in the event I receive a ticket, on or off the job. 4. To always use my seat belt while working here and keep my radio/music to a volume level my supervisor finds acceptable at all times. 5. To be employed here as a driver it is up to me to supply a clean, safe, dependable vehicle with proper insurance. I realize that if I am employed as a driver, my employment can be terminated if my car is not in proper working order. 6. To never allow anyone else to ride with me while working, unless instructed by my supervisor. 7. To never eat or drink while driving. 8. To discuss with my supervisor any incident involving a vehicle that happens while working, no matter whose fault, and whether or not there were any injuries. I certify the facts contained in this application are true and complete. I understand that, if employed, false statements or ommissions on this

application are grounds for dismissal. I give my authorization to verify all information provided in this application.

Signature

Date

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