



This form provided for exclusive use of Rocco's® Pizza Shop

Date _____

EMPLOYMENT APPLICATION

For General Restaurant Work

PERSONAL INFORMATION: (please print clearly)

NAME _____
 Last First Middle Initial

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

CELL (____) _____ EMAIL _____

Have you ever worked for a pizza shop before? Yes No If yes, when/where _____

Are you over 18 years of age? Yes No (If NO, a work permit will be required.) _____

IN CASE OF EMERGENCY NOTIFY:

NAME _____ TELEPHONE (____) _____
 Last First Middle Initial

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

AVAILABILITY:

Are you legally able to be employed in the United States? Yes No (If hired, verification will be required by law.)

What type of position are you seeking? Part time Full time Seasonal Temporary

Are you able to meet the attendance requirements of the position? Yes No

Have you been convicted* of a felony within the last 5 years? Yes No
 (*conviction will not necessarily disqualify an applicant from employment)

HOURS AVAILABLE:

	S	M	T	W	T	F	S
From							
To							

Total hours available per week _____ Desired pay _____
 Date available to start work _____

EDUCATION:

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS ATTENDED	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				

PREVIOUS EMPLOYMENT:

Company _____ Address _____ City _____ State _____

Telephone (____) _____ Position _____ Supervisor _____

Dates worked: From _____ To _____ Wage _____ Reason for leaving _____

Company _____ Address _____ City _____ State _____

Telephone (____) _____ Position _____ Supervisor _____

Dates worked: From _____ To _____ Wage _____ Reason for leaving _____

Do we have permission to contact your current employer? Yes No

If No, please explain _____

Rocco's Pizza Shop
 1053 Portage Trail
 Cuyahoga Falls, Ohio 44221

Rocco's Pizza Shop
 973 Graham Road
 Stow, Ohio 44224

REFERENCES: (please do not use family members)

Name _____	Telephone (_____) _____	Years Known _____
Address _____	City _____	State _____
Name _____	Telephone (_____) _____	Years Known _____
Address _____	City _____	State _____

EMPLOYMENT TEST

(No Calculators Please)

PART I

.87	10.00
.78	- 4.53
3.49	
<u>+2.76</u>	
	37.25
	<u>-32.08</u>

For the following questions, state your answers in terms of bills and coins. For example, \$3.57 would be 3 dollar bills, 2 quarters, 1 nickel, and 2 pennies.

1. If the customer's order came to \$12.78 and he gave you a \$20.00 bill, what is his change?

2. If the customer's order came to \$7.42 and he gave you \$20.45, what is his change?

PART II

- A. A customer complains that he was short changed by you, receiving only 12¢ change from \$3.00 instead of 21¢. What would you do?

- B. Which do you consider to be more important as far as a restaurant is concerned – courteous, prompt service or a quality product?

- C. What do you consider to be the most important qualifications of a Rocco's Pizza Shop employee?

- D. You are working alone and your shift is due to be over at 5 P.M. The individual who is scheduled to begin working at 5 P.M. does not show up. What do you do?

- E. Our busiest days of the year are Valentines Day, Halloween, Super Bowl Sunday, Christmas Eve, and New Years Eve. Would you be willing to work these shifts?

- F. We are also open on Memorial Day, 4th of July, Labor Day and New Years Day. Would you be willing to work these holidays ?

The Secretary of Health & Human Services has determined that certain diseases, including Hepatitis A, typhoid fever (Salmonella typhi), shigellosis (Shigella spp.), and E coli (Escherichia coli 0157:H7) may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves handling & serving food, food service equipment and utensils in a sanitary and healthy fashion. Is there any reason why you cannot perform the essential functions of this job? YES NO If yes, explain: _____

I CERTIFY THAT I HAVE READ AND FULLY COMPLETED BOTH SIDES OF THIS APPLICATION AND THAT INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY OMISSION OR FALSE INFORMATION IS GROUNDS FOR DISMISSAL. I AUTHORIZE THE REFERENCES LISTED ON THIS APPLICATION TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND PERTINENT INFORMATION THEY MAY HAVE, PERSONAL AND OTHERWISE. I UNDERSTAND THAT AS PART OF THE PROCEDURE FOR MY EMPLOYMENT APPLICATION AN INVESTIGATIVE CONSUMER REPORT MAY BE MADE CONCERNING MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING.

SIGNATURE _____

DATE _____

FOR OFFICE USE ONLY

INTERVIEWER OR REFERENCE COMMENTS _____