

APPLICATION FOR EMPLOYMENT

BACO'S PIZZA INC.

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

DATE _____

NAME		SOCIAL SECURITY NO.	
ADDRESS		CITY	STATE
PHONE NO. () —		REFER ED BY	
DATE YOU CAN START / /	ARE YOU EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	HIGH SCHOOL DIPLOMA <input type="checkbox"/> YES <input type="checkbox"/> NO	

FORMER EMPLOYERS

DATE MONTH AND YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOW AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS KNOWN

AUTHORIZATION

"I certify that the facts contained in this application are true and compete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds of dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representatives of Baco's Pizza Inc. has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ACD) and other relevant federal and state laws."

DATE _____ SIGNATURE _____

INTERVIEWED BY _____ DATE _____