



Application for Employment

Siler City Sir Pizza, Inc.

Siler City Sir Pizza, Inc. is an Equal Opportunity Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or any other legally protected right.

Personal

Last Name:		First Name:		MI	Position:
					Date You Can Start:
					Salary Desired:
Street Address:				City, State & Zip:	
Social Security Number:	Phone:	Cell Phone:		Email:	
Are you eligible to work in the United States?		Yes	No		
Are you 18 years of age or older?		Yes	No	If NO, what is your date of birth?	
Are you currently employed?		Yes	No	If YES, what is your current job title & department?	
Have you ever been employed by Sir Pizza?		Yes	No	If YES, dates of employment & reason for leaving	
Are you related to any current Sir Pizza employee?		Yes	No	If YES, name & relationship to you?	
Have you ever pleaded guilty or been convicted of a crime excluding minor traffic violations?		Yes	No	If YES, please explain.	
How did you learn about this employment opportunity at Sir Pizza?					

Education

Name of School	City/State	Did you Graduate?	Degree Received
High School:			
College:			

Other Credentials/Licenses/Professional Affiliations, Etc.,

General

Please List Special Skills, Technical Skills, Clerical Skills, Trade Skills, Etc.
Activities (Civic, Athletic, Etc.)
U.S. Military or Naval Service: Yes No

Work Experience

Please give work history. Begin with your current or most recent employer.

Start Date:		Most recent (or current) Employer's Name and Complete Address:			
End Date:					
Starting Wage:	Ending Wage:	Your Job Title:	Supervisor's Name:	Phone:	
Description of Duties:					
Reason for Leaving:			May we contact this employer? Yes No		

Start Date:		Previous Employer's Name and Complete Address:			
End Date:					
Starting Wage:	Ending Wage:	Your Job Title:	Supervisor's Name:	Phone:	
Description of Duties:					
Reason for Leaving:			May we contact this employer? Yes No		

Start Date:		Previous Employer's Name and Complete Address:			
End Date:					
Starting Wage:	Ending Wage:	Your Job Title:	Supervisor's Name:	Phone:	
Description of Duties:					
Reason for Leaving:			May we contact this employer? Yes No		

References

Name	Phone	Address	Years Acquainted
1.			
2.			
3.			

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION:

I certify that the information on this application and it's supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, misrepresentation, omission of facts, represents for elimination, from consideration for employment, or termination after employment if discovered at a later date. I authorize Sir Pizza to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. I understand that employees of Sir Pizza serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with Sir Pizza regulations. I understand that if employed on a temporary basis, I will be paid for hours worked only, and will be ineligible for benefits, including paid time off. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first Three Months of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Sir Pizza has a vital interest in maintain a drug and alcohol-free environment for its employees and customers. Sir Pizza prohibits the use of, possession of, distribution of, purchase or sale of, trafficking, or employee's reporting for work under the influence of intoxicants, drugs, controlled or illegal substances.

Applicant Signature: _____ **Date:** _____

You can email completed form to sirpizzasilercity+application@gmail.com or drop off at the Siler City Sir Pizza during normal business hours. 1403 E 11th St. Siler City, NC 27344