

Application For Employment



It is the policy of Tony Roma's, to provide employment opportunities to all qualified candidates without regard to race, color, religion, sex, national origin, age, disability or other classification protected by law.



PERSONAL INFORMATION				
Your Name:				
Last	First	Mid. Init.	SS#:	
Other names or Social Security Numbers under which you've been employed:				
Name: _____			SS#: _____	
Name: _____			SS#: _____	
Current Address:				
Street	City	State	Zip	
Home Telephone:	Message/ Pager:	How long have you lived at this address?		
Have you read the position descriptions? <input type="checkbox"/> Yes <input type="checkbox"/> No		What position are you applying for today?		
How did you hear about the position?		What hourly wage (excluding tips) or annual salary are you expecting?		
You're applying for a position in a business that operates day and night, seven days a week. Please indicate the times you're normally available: <input type="checkbox"/> full time <input type="checkbox"/> part time <input type="checkbox"/> days <input type="checkbox"/> nights <input type="checkbox"/> overtime				
Are there any <u>specific</u> times that you're unavailable?		Are you willing to travel if required to fulfill your job responsibilities?		
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been <u>convicted</u> of a felony or misdemeanor? If "yes", please provide details. ("Yes" <u>does not</u> automatically disqualify you.)		
Do you have the legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		(We will require legal proof of age and employment eligibility if you accept an offer of employment.) <input type="checkbox"/> Yes Details: _____ <input type="checkbox"/> No _____		
If you're applying for a position that requires you to: prepare alcoholic beverages, serve alcoholic beverages, or operate kitchen equipment, can you provide proof that you're old enough to do so according to all applicable local and state laws? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Who would you like us to contact in an emergency?				
Name	Telephone	How is this person related to you?		
Street	City	State	Zip	
Do you have any condition that may require modification of our equipment or facilities to allow you to fulfill the job requirements of the position you're applying for, as described in the position descriptions? If "yes", please provide details. <input type="checkbox"/> Yes <input type="checkbox"/> No				
Details: _____				
Do you have any communicable or transmissible disease that can be spread by serving or preparing food or alcoholic beverages? If "yes", please provide details. <input type="checkbox"/> Yes <input type="checkbox"/> No				
Details: _____				
Please provide details about your education and qualifications:				
	Where?	Did you graduate?	When?	What degree?
High School				
College				
Graduate School				
Special Schooling/ License/Certificate	What organization provided it?	What was it you received?		When?
What skills do you currently have that you believe qualify you for the position you're applying for?				
Do you speak, read or write a language in addition to English?				
<input type="checkbox"/> speak _____ <input type="checkbox"/> read _____ <input type="checkbox"/> write _____				

EMPLOYMENT HISTORY

Have you worked at, or applied for work at, **TONY ROMA's** before? If "yes", provide details below. Yes No

I have worked at **TONY ROMA's** before. Where? _____

I have applied for work at **TONY ROMA's** before. When? _____

PLEASE TELL ABOUT THE LAST THREE COMPANIES YOU WORKED FOR, INCLUDING MILITARY SERVICE

Company	Address	Telephone	
When did you start working there?	What was your starting pay?	What was your job title?	Who was your supervisor?
When did you stop working there?	What was your ending pay?	Why did you leave?	May we do a reference check?
Company	Address	Telephone	
When did you start working there?	What was your starting pay?	What was your job title?	Who was your supervisor?
When did you stop working there?	What was your ending pay?	Why did you leave?	May we do a reference check?
Company	Address	Telephone	
When did you start working there?	What was your starting pay?	What was your job title?	Who was your supervisor?
When did you stop working there?	What was your ending pay?	Why did you leave?	May we do a reference check?

Is there anything you'd like say about any periods of unemployment indicated by the dates of employment you've indicated above?

CONDITIONS OF EMPLOYMENT

(PLEASE READ THIS CAREFULLY BEFORE YOU SIGN THIS APPLICATION)

I, the undersigned, state that all of the information I am including on this Application For Employment is true and understand that falsification of any of this information, or any follow-up information provided during an interview or on my resume may result in disqualification for employment or immediate dismissal from my position or termination of benefits if I am already employed.

I authorize Tony Romas, (herein called the Company), to verify this information and to contact any medical, academic, employment and personal references I have provided or may provide unless I specifically deny permission for a specific reference. I further authorize the Company and/or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to, criminal history and motor vehicle driving records. I understand that my employment is contingent upon a satisfactory report from this background investigation.

I authorize all references I have provided or may provide to release any and all information concerning my background and hereby release all such references as well as the Company from any liability for any claim or damage whatsoever for issuing, receiving or using this information. A facsimile or xerographic copy of my authorization is to be taken as being as valid as this original.

According to the Fair Credit Reporting Act, I am entitled to know if insurance or employment is denied because of information obtained by the Company from a consumer reporting bureau. I will be so advised by the Company and be given the name of the reporting agency or source of information.

I understand that nothing contained in the Application for Employment or in the granting and scheduling of an interview creates or may be taken as creating an employment contract between the Company and me for either employment or the provision of any benefit. I further understand that, if employed, my employment will be in accordance with all applicable Company policies, procedures and amendments thereto.

Finally, I understand that, if employed, I have the right to end my employment at any time and that the Company has the same right, its only obligation being to pay the wages or salary that I earn up to and including the date on which my employment ends.

Signature: _____

Today's Date: _____