



Savelli's is an equal opportunity employer.

Date: ___/___/___

Mark one: KITCHEN _____ FRONT _____

Mark one: Full-time: _____ Part Time: _____ Seasonal: _____

APPLICANT INFORMATION

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____

Date Available to Start: _____ Desired Pay Range: _____

If you are under the age of 18 and we require a work permit, can one be furnished?

Yes: _____ No: _____ N/A: _____

Are you a citizen of the United States? Yes: _____ No: _____

If not, are you legally allowed to work in the United States? Yes: _____ No: _____

If hired, can you show proof of your legal right to work in the U.S.? : _____

Do you have any physical conditions that could prevent you from performing any work related tasks? Yes: _____ No: _____

If yes, please explain: _____

Have you ever plead "guilty," "no contest," or been convicted of a crime?

Yes: _____ No: _____

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Who referred you to us? : _____

Why would you like to work at Savelli's?: _____

Summarize your skills and qualifications: _____

Please summarize your availability: _____

Approximate hours desired: _____

If hired, how long do you expect to work here?: _____

EDUCATION

High School: _____ Address : _____
#of years completed: _____ Did you graduate?: _____ GPA: _____ Class Rank: _____

College/University/Other: _____ Address: _____
#of years completed: _____ Did you graduate?: _____ GPA: _____ Class Rank: _____

REFERENCES:

Please provide information for two professional references to whom you are not related and by whom you have not been employed.

Name: _____ Phone _____

Relationship to Applicant: _____ Years Known: _____

Name: _____ Phone _____

Relationship to Applicant: _____ Years Known: _____

PREVIOUS EMPLOYMENT

Begin with most recent position. If you need extra space, please attach another sheet.

Company Name: _____ Dates of Employment: _____

Address: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Responsibilities: _____

Reason for leaving: _____

May we contact this employer for a reference? _____

Company Name: _____ Dates of Employment: _____

Address: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Responsibilities: _____

Reason for leaving: _____

May we contact this employer for a reference? _____

Company Name: _____ Dates of Employment: _____

Address: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Responsibilities: _____

Reason for leaving: _____

May we contact this employer for a reference? _____

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries into my personal, employment, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability when responding to inquiries in connection with my application.

In the event that I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____