Gallucio's Italian Restaurant Employment Form.

1709 Lovering Ave Wilmington, DE 19806 302-655-3689

Application for Employment

An Equal Opportunity Employer

Pre-Employment Questionnaire

							Name
		ldle	Middle	First	Ι	Last	
						8	Address
Zip	State		City			Street	
						//	D.O.B
	//	ble	_ Date Available			Applied For	Position Ap
	_When?	·	If Yes, Where?	No	Yes	plied to this company before?	Ever applied
				No	Yes	have a valid driver's license?	Do you have
				No	Yes	have a vehicle?	Do you have
		es No	ed States? Yes	e Unit	nt in th	legally eligible for employme	Are you leg
		es No	Yes	Are you a citizen of the United States? *			
		es No	or? * Yes	emean	r misde	ou ever convicted of a felony of	Were you ev
						blease explain:	If yes, pleas
-							-

* You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

Do you have any physical defects, which specifically preclude you from performing certain kinds of work? Yes No

Education:

Highest Grade Completed			
High School:	Did you graduate?	College:	Did you graduate?
C		C	
Special Skills?			

Former Employers:

Dates Ma fur	Name/Address	Wage	Position	Reason for
Mo./yr.	of Employer			Leaving
From:				
<i>To:</i>				
From:				
To:				
From:				
To: From:				
To:				

<u>References:</u> (Give the names of two persons not related to you, whom you have known at least one year. Do not include persons whose affiliation may reflect your race, religion, or national origin.)

Name	Address / Phone	Business	Years Acquainted
1.			
2.			

Military Service:

Branch	Dates of Service	Rank at Discharge	Type of Discharge

If other than honorable, explain _____

Person to notify in case of emergency:

Name: _____ Phone Number: _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. I also understand that any offer of employment would be contingent on my ability to produce the required documentation. Further, I understand and agree that my employment is at will, and can be terminated at any time, with or without cause and with or without notice either by myself or by the company.

Signature: Date: