Employment Application – Salvatore's Pizza

Dream Big & Join Our Family! Several former pizza box makers & delivery drivers now manage or operate their own locations! We are the family born & raised in Rochester, NY since 1978!



		Applic	cant In	format	ion			salv	atores.com
Full Name:						Date:			
	Last		First	t		M.I.	_		
Address:									
Street Address							A	partment/	Unit #
									_
	City					State	e Z	IP Code	
Phone:					Email				
Position App	plied for: Cashie	r/Phones	Kitchen	/Cook] Driver ☐	Manager □	Server _	Bar□	Baker
Are you a citizen of the United States?			YES	NO	If no, are yo	ou authorized	to work in the		ES NO
Have you ever worked for this company?			YES	NO	If yes, what location?				
Have you ever been convicted of a felony? YES NO Are you 16 Years or Older? YES NO (proof of work perm may be required) May be required.								of of work permit nay be required)	
If yes, expla	nin:								
How did you	u hear about this	job?							
How far do you live from this location? Do you have transportation? YES \[\] NO \[\]									
What type o	of employment are	e you looking fo	or? PAF	RT-TIME	☐ FULL-TII	ME SEAS	ONAL TEN	MPORAF	RY 🗌
Hours Per V	Date Available: AVA			AVAILA	ILABILTY CHART:				
	MONDAY	TUEDAY	WEDN	IESDAY	THURSDA	Y FRIDAY	SATURI	DAY S	UNDAY
START END									
Driver Applicants Only: Driver's License # State of Issuance Date of Birth: If you are applying for a driver position, have you had any moving violations/tickets within the last 12 months, or have ever been convicted of driving under the influence? YES NO (I understand that I am providing my DOB and it will not be used against employment eligibility, but will be used solely for the purpose of potentially obtaining background record information for driving eligibility)									
		WE ARE A	AN EQU	IAL OPI	PORTUNITY	EMPLOYER	R!		
				Educ	ation				
School Most									
Recently Attended:			A	ddress:_					
From:	To:	Di	id you gi	raduate?	YES NO				

	References
Please list personal or professional reference	ces. (Please no family members)
Full Name:	Relationship:
Address:	Phone:
Full Name:	Relationship:
Address:	Phone:
	Previous Employment
Company:	Phone
	Supervisor:
Job Title:	
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for a	YES NO a reference?
Company:	Phone:
Address:	Supervisor:
Job Title:	Starting Salary:\$ Ending Salary:\$
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for a	YES NO reference?
	NO Any Health Problems that could affect employment? YES NO
	isclaimer and Signature
I certify that my answers are true and complete this application leads to application to the complete true and complete the complete true and complete true	
If this application leads to employment, I und interview may result in my release.	derstand that false or misleading information in my application or
Signature:	Date: