

COGANS PIZZA

APPLICATION FOR EMPLOYMENT

SUBMIT TO manager@coganspizza.com

NAME:		DATE:	
ADDRESS:			
PHONE #:		EMAIL ADDRESS:	
EMERGENCY CONTACT:		EMERGENCY PHONE #:	
POSITION APPLYING FOR:			

PRIOR WORK EXPERIENCE

Please do not omit any prior employment. Attach additional sheets if necessary.

Employer _____ Address _____ Phone # _____ Your Title _____ Supervisor's Name and Title _____ _____ _____ Hours Per Week _____ Principal Responsibilities _____ _____ _____ _____	Length of Employment _____ Start Date ____/____/____ End Date ____/____/____ Rate of Pay _____ Reason for Leaving _____ _____ _____ May We Contact This Employer? ____ Yes ____ No If No, Please Explain _____ _____ _____ _____
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Employer _____ Address _____ Phone # _____ Your Title _____ Supervisor's Name and Title _____ _____ _____ Hours Per Week _____ Principal Responsibilities _____ _____ _____ _____	Length of Employment _____ Start Date ____/____/____ End Date ____/____/____ Rate of Pay _____ Reason for Leaving _____ _____ _____ May We Contact This Employer? ____ Yes ____ No If No, Please Explain _____ _____ _____ _____
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Employer _____
Address _____
Phone # _____
Your Title _____
Supervisor's Name and Title _____

Hours Per Week _____
Principal Responsibilities _____

Employer _____
Address _____
Phone # _____
Your Title _____
Supervisor's Name and Title _____

Hours Per Week _____
Principal Responsibilities _____

Length of Employment _____
Start Date ____ / ____ / ____
End Date ____ / ____ / ____
Rate of Pay _____
Reason for Leaving _____

May We Contact This Employer? Yes No
If No, Please Explain _____

Length of Employment _____
Start Date ____ / ____ / ____
End Date ____ / ____ / ____
Rate of Pay _____
Reason for Leaving _____

May We Contact This Employer? Yes No
If No, Please Explain _____

Have you ever had any disciplinary problems with a former employer?
 No Yes, please explain. _____

AVAILABILITY

MONDAY _____
TUESDAY _____
WEDNESDAY _____
THURSDAY _____
FRIDAY _____
SATURDAY _____
SUNDAY _____

REFERENCES

Name	Relationship to You	Address	Phone Number

EDUCATION

Name of High School: _____

Name of college, university, technical, vocational, or business school(s) attended:

School: _____ Course of Study: _____

School: _____ Course of Study: _____

Did you graduate? Yes _____ No _____ Degree received, if any _____

Answering "Yes" to any of the below is not an absolute bar to employment but will be considered only with respect to the specific requirements of the job for which you are applying:

Have you ever been convicted of a misdemeanor (excluding moving traffic violations) or a felony?

___ No ___ Yes, please explain. _____

Are there any criminal charges or proceedings pending against you?

___ No ___ Yes, please explain. _____

Have you ever had any certificate, permit, or license revoked or suspended?

___ No ___ Yes, please explain. _____

If the position you are applying for requires you to drive, do you have a valid Virginia Driver's License? _____

Do you have any friends or family working for Cogan's Pizza, or Hanks Filling Station?

Why would you like to work for Cogans Pizza North:

ADDITIONAL COMMENTS:

In conformity with applicable laws, Cogans Pizza LLC. is an Equal Opportunity Employer and does not discriminate on the basis of race, color, creed, religion, sex, age, marital status, sexual orientation, national origin, citizenship status, physical or mental disability, or status as a disabled veteran, a Vietnam Era veteran, a veteran who has served on active duty for which a campaign badge was authorized, or a newly separated veteran.

I acknowledge that, as a condition of employment, I will be required to provide evidence of my ability to work lawfully in the United States, in accordance with the federal I-9 process. I understand that, if hired, I will be an employee at will; that is, my employment will be for no definite period of time but rather will be subject to termination by myself or the company at any time for any reasons, with or without cause.

I unconditionally certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I acknowledge that these questions shall be continuing in nature, and I have a duty to update, change or further amplify my answers to guarantee accuracy at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application, or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with Cogans Pizza LLC. In the event that Cogans Pizza LLC. determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted by Cogans Pizza LLC. for employment, I hereby agree to abide by the policies, regulations, and directives of Cogans Pizza LLC.

Signature: _____

Printed Name: _____

Date: _____

AUTHORIZATION TO RELEASE PERSONAL INFORMATION

To whom it may concern:

I have applied for a position with Cogans Pizza LLC., I hereby authorize the release of personal and professional information to Cogans Pizza LLC. for the purpose of an investigation of my background and qualifications for employment. Such information may include, but is not limited to, job performance, attendance, eligibility for re-employment with a former employer, reasons for termination of previous employment, criminal record, conduct and character.

I agree to release and hold harmless from any and all liability, Cogans Pizza LLC., its authorized representatives and any third parties, for any acts performed in good faith and without malice relating to any communications or disclosure of any kind, involving me which are performed, made, requested, or received by Cogans Pizza LLC., Inc. and its authorized representatives to, from, or by any third party, including otherwise privileged or confidential information.

The term "Cogans Pizza LLC. and its authorized representatives" means Cogans Pizza LLC. and the entities affiliated with it, to include Cogan's Pizza, Belmont House of Smoke and Colley Cantina, to which I have applied for employment, and any individuals who may act on Cogans Pizza LLC 's behalf in obtaining and evaluating my professional qualifications, or acting upon my application. The term "third parties" means all individuals and entities from whom information has been requested by Cogans Pizza LLC . or its authorized representatives.

Full Name: _____

Date: _____

Other Name(s) Used: _____

Social Security Number: _____

Telephone Number: _____

Current Address: _____

Signature: _____