

EMPLOYMENT APPLICATION

NAME _____ STREET ADDRESS _____
FIRST NAME _____ MIDDLE INITIAL _____ LAST NAME _____
APT. NO. _____ CITY _____ STATE _____ ZIP _____ PHONE NO. (_____) _____
OR BOX _____ AREA CODE _____
ARE YOU 18 YES OR OLDER? NO, IF NOT, AGE _____ EVER WORKED IN A PAPA ROMANO'S RESTAURANT BEFORE?
IF YES, DATES AND LOCATION _____

AVAILABILITY: ARE YOU APPLYING FOR POSITION OF DRIVER OR INSIDE? _____
TOTAL HOURS AVAILABLE PER WEEK _____
IF APPLYING FOR DRIVER DO YOU HAVE PROOF OF INSURANCE AND A VALID DRIVER'S LICENSE? YES NO
ARE YOU LEGALLY ABLE TO BE EMPLOYED IN THE U.S.: YES NO
HOW DID YOU HEAR OF JOB? _____
HOW FAR DO YOU LIVE FROM RESTAURANT? _____
DO YOU HAVE TRANSPORTATION TO WORK? _____

| | M | T | W | T | F | S | S |
|------|---|---|---|---|---|---|---|
| FROM | | | | | | | |
| TO | | | | | | | |

SCHOOL MOST RECENTLY ATTENDED:

NAME _____ LOCATION _____ PHONE _____
TEACHER OR COUNSELOR _____ DEPT. _____ LAST GRADE COMPLETED _____ GRADE POINT AVERAGE _____
GRADUATED YES NO NOW ENROLLED? YES NO SPORTS OR ACTIVITIES _____

TWO MOST RECENT JOBS: (IF NOT APPLICABLE, LIST U.S. MILITARY, WORK PERFORMED ON A VOLUNTARY BASIS OR PERSONAL REFERENCES)

COMPANY _____ LOCATION _____
PHONE _____ JOB _____
SUPERVISOR _____ DATES WORKED: FROM _____ TO _____
SALARY _____ REASON FOR LEAVING _____ **MGMT. REFERENCE CHECK DONE BY:** _____

COMPANY _____ LOCATION _____
PHONE _____ JOB _____
SUPERVISOR _____ DATES WORKED: FROM _____ TO _____
SALARY _____ REASON FOR LEAVING _____ **MGMT. REFERENCE CHECK DONE BY:** _____

***DURING THE PAST 7 YEARS, HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS?** YES NO

IF YES, DESCRIBE IN FULL _____

*A conviction will not necessarily bar you from employment.

1. I certify that the information contained on this application is correct to the best of my knowledge and understand that any omission or erroneous information is grounds for dismissal in accordance with the policy of this Papa Romano's franchise. 2. I authorize the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. 3. I acknowledge that, if I become employed, I will be free to terminate my employment at any time for any reason and this Papa Romano's franchise retains the same rights. No Papa Romano's representative of this Papa Romanos franchise has the authority to make any contrary agreement.

DATE _____ SIGNATURE _____

This independent Papa Romano's franchise is an equal opportunity employer. Various Federal, State, and local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability or veteran status. It is this Papa Romano's Franchise policy to comply with these laws, as applicable, and information requested on this application will not be used for any purpose prohibited by law.

YOUR APPLICATION WILL BE CONSIDERED ACTIVE FOR 30 DAYS — FOR CONSIDERATION AFTER THAT YOU MUST REAPPLY. THIS RESTAURANT IS OWNED AND OPERATED BY AN INDEPENDENT PAPA ROMANO'S LICENSEE.