



RISTORANTE ' WOOD FIRE PIZZA ' WINE BAR

11095 Resort Road, Ellicott City, MD 21042  
(410) 750-0001

## Application for Employment

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
                    First      Last

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
                    Street      (Apt)

Contact Information: \_\_\_\_\_ E-mail: \_\_\_\_\_  
  Cellphone

Position Applying For: \_\_\_\_\_ Available Start Date: \_\_\_\_\_

Desired Pay: \_\_\_\_\_ Are you currently employed: \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_ Yes \_\_\_\_ No  
If No, are you authorized to work in the United States? \_\_\_\_ Yes \_\_\_\_ No

Have you ever been convicted of a Felony? \_\_\_\_ Yes \_\_\_\_ No  
If Yes, explain: \_\_\_\_\_

Have you ever worked for this company? \_\_\_\_ Yes \_\_\_\_ No  
If Yes, when? \_\_\_\_\_

Do you have reliable transportation to get to work? \_\_\_\_ Yes \_\_\_\_ No

Are you willing to work nights (4-Close)? \_\_\_\_ Yes \_\_\_\_ No      Weekends? \_\_\_\_ Yes \_\_\_\_ No

Additional notes on availability:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Education History:**

High School: \_\_\_\_\_ Years Attended: \_\_\_\_\_

If in High School, can you acquire a work permit? \_\_\_\_ Yes \_\_\_\_ No

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

College: \_\_\_\_\_ Years Attended: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Have you served in the military? \_\_\_\_ Yes \_\_\_\_ No

**Additional Education:**

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**Employment History:**

1.) Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ City/Sate: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Can we contact the previous employer? \_\_\_\_ Yes \_\_\_\_ No

If No, why not? \_\_\_\_\_

2.) Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ City/Sate: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Can we contact the previous employer? \_\_\_\_ Yes \_\_\_\_ No

If No, why not? \_\_\_\_\_

3.) Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Can we contact the previous employer?  Yes  No

If No, why not? \_\_\_\_\_

**Personal Reference:**

1.) Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

2.) Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

3.) Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Signature