



Rosa's Italian Ristorante Pizzeria

4098 Oaklawn Boulevard
Hopewell, VA 23860
804-458-8744

Bermuda Square
Shopping Center
Chester, VA 23836
804-748-9451

Application for Employment

Name (Please Print): _____

Social Security Number: _____

DOB: _____ Phone: _____

Address: _____ Sex: _____

City: _____ State: _____ Zip: _____

Marital Status: _____ # of Children: _____

Spouse's Name: _____ His or Her Occupation: _____

IN CASE OF EMERGENCY:

Name: _____ Relation: _____

Address: _____ Phone: _____

References:

1. Name: _____ Phone: _____

Relation: _____

2. Name: _____ Phone: _____

Relation: _____

3. Name: _____ Phone: _____

Relation: _____

Personal Information:

Are you a U.S. Citizen? YES NO

Do you Transportation? YES NO

Will you Work Weekends? YES NO

Have you been convicted of a felony? YES NO

If Yes: _____

Position Desired: _____

Availability: _____

Education:

Highest Grade Completed? _____

Special Courses: _____

Interests / Hobbies: _____

Employment History: (present - past)

1. Business _____ Employer's Name: _____

Phone: _____ Reason For Leaving: _____

From: _____ To: _____

2. Business _____ Employer's Name: _____

Phone: _____ Reason For Leaving: _____

From: _____ To: _____

3. Business _____ Employer's Name: _____

Phone: _____ Reason For Leaving: _____

From: _____ To: _____

I certify the facts contained in this application are true and completed to the best of my knowledge. I understand if employed, falsified facts in this application are cause for immediate dismissal.

I authorize investigation of all statements contained herein and the references listed to give any and all information pertaining to employment and any pertinent information they may have. And release all parties from all liability for damage that may result from varnishing some to you.

I also submit to any random drug or lie detector test.

Signature: _____ Date: _____