



Larry's Pizza  
Conway, Arkansas



# Application For Employment

Employment Questionnaire

An Equal-Opportunity Employer

## Personal Information

NAME: \_\_\_\_\_ Date: \_\_\_\_\_  
LAST FIRST MIDDLE

PRESENT ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

PERMANENT ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Home Phone #: \_\_\_\_\_ Are you 18 years or older?  Yes  No If No, D.O.B.: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Are you a U.S. citizen?  Yes  No If "No", VISA number: # \_\_\_\_\_

Have you ever been convicted of or plead guilty to a crime?  Yes  No

If "Yes", Explain: *(An answer of "Yes" will not necessarily disqualify you from consideration for employment)*

## Employment Desired

Position Preferred: \_\_\_\_\_ Pay Desired: \_\_\_\_\_ Date Available to Start: \_\_\_\_\_

Are you employed now?  Yes  No If so, may we contact your present employer?  Yes  No

Are your employment and/or education records under any other name?  Yes  No If yes, provide the name(s): \_\_\_\_\_

*Please indicate your availability for work:*

Mon	Tue	Wed	Thu	Fri	Sat	Sun

## Education

Institution:	Name & Location of School:	# Of Years Attended:	Did you graduate?	Graduation Date:
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Special Skills: \_\_\_\_\_

Hobbies or Activities: \_\_\_\_\_

*(Exclude organizations in which the name indicates the race, creed, sex, age, marital status, color or nation of origin of its members.)*

U.S. Military or Naval Service?  Yes  No Rank: \_\_\_\_\_ Present Membership in National Guard or Reserves?  Yes  No

# Employment History

List below the last three employers, starting with the last one first

Company Name:		Company Street Address:			
City:		State:	Zip:	Phone:	
Supervisor Name:		May we contact this employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Your Job Title:		Responsibilities:			
Start Date:	End Date:				
Starting Pay:	Ending Pay:				
Reason for Leaving:					

Company Name:		Company Street Address:			
City:		State:	Zip:	Phone:	
Supervisor Name:		May we contact this employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Your Job Title:		Responsibilities:			
Start Date:	End Date:				
Starting Pay:	Ending Pay:				
Reason for Leaving:					

Company Name:		Company Street Address:			
City:		State:	Zip:	Phone:	
Supervisor Name:		May we contact this employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Your Job Title:		Responsibilities:			
Start Date:	End Date:				
Starting Pay:	Ending Pay:				
Reason for Leaving:					

# References

Please list professional references before personal references

Name:	Address:	Phone:	Relationship:

*I hereby certify that the preceding information is true and correct.*





## Reference Authorization and Reference Check Consent Form

*Note: [Arkansas Act 1474 of 1999 - "An Act to provide current and former business employers with protection for providing job information about current or former employers to prospective employers; and for other purposes".]*

Pursuant to Arkansas Act 1474 of 1999, I \_\_\_\_\_ (applicant) voluntarily give consent to Larry's Famous Pizza, its agent or representatives, to make any inquiry of my employment history through any investigative means or manner of Larry's Famous Pizza's choice. Further, I hereby give consent to any and all prior employers of mine to provide information with regard to my employment to Larry's Famous Pizza; and indemnify, release and hold harmless any entity for such action. I further agree that Larry's Famous Pizza is authorized to make copies of such information, documentation or record which shall have the same effect as the original and the employment decision of Larry's Famous Pizza may be based upon any such information furnished.

Specifically, I authorize the release and disclosure of the following information:

1. Dates and duration of employment.
2. Current pay rate and wage (salary) history.
3. Job descriptions and duties.
4. My last written performance evaluation prepared prior to the date of this request.
5. Attendance information.
6. Results of drug or alcohol test administered within one (1) year prior to the request.
7. Threats or violence, harassing acts, or threatening behavior related to the workplace or directed toward another employee.
8. Whether I voluntarily or was involuntarily separated from employment and the reasons for the separation, and
9. Whether I am eligible for rehire.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date