## **Cannon Beach Restaurant**

231 N Hemlock Box 187 Cannon Beach, OR 97110 Store: 503.436.0333 Office: 503.738.5284

Signature of Applicant

From:

\_To:\_

Store: 503.436.0333 Office: 503.738.5284 Pizza a'f **Seaside Oregon Restaurant** 

611 Broadway Seaside OR 97138 Store: 503.739.7500 Office: 503.738.5284

Dates

Trade:



## **Employment Application**

## You must read and sign our Applicant's certification agreement

In consideration of my employment, I agree to conform to the rules and regulations established by Bella Ristorante, Inc. (dba) Pizza a'fetta. I understand that employment at Bella Ristorante, Inc. (dba) Pizza a'fetta is "at will" which means that either I or the Company can terminate the employment relation at any time with or without notice, and for any reason not prohibited by law. I declare that the facts set forth in this application for employment are true and complete to the best of my knowledge. I authorize the Company to investigate all information through interviews with references and past employers listed on this application and I authorize these references and past employers to provide the Company any information they have regarding my employment history and fitness to be employed by Bella Ristorante, Inc. (dba) Pizza a'fetta. I further understand that any misleading or incorrect statements or an incomplete application may be the cause for immediate discharge, if employed.

This establishment experiences a high volume of customers that demands excellent interpersonal skills and

standards we would be interested in your application. To learn more about us please visit www.pizza-a-fetta.com									
Applicant Information									
Full Name:	Last First			Date:					
Address:	Street Address						ment/Unit #		
	City					State	ZIP Code		
Phone:	(	)	Cell Phone: (						
Email Addre	ess:								
Position App		Shift Manager	Wait Staff Pizza Preparation		aration	Counter Help			
Circle all that apply		Full-Time	Part-time	AM Shift			PM Shift		
		Weekdays	Weekends	7 Da	Days a week				
Employment Duration:		Year Round	Seasonal	Summer			Winter Holiday		
Do you have prearranged vacation dates you can not work?									
Date Available to work					Desired Wage/Salary \$				
Do you have a current OLCC License Yes				No 🗌	Expi	ration Date			
Do you have a current Food Handler's Permit? Yes No Expirat						iration Date_			
Education									
High School:Address:									
From:	om:To:Did you graduate?		YES	NO	Degree: _				
College:Ad			Address:						
From:		_To:	oid you graduate?	YES	NO	Degree: _			
Trade School:			Address:						

Did you graduate?

Please list thre	e professional references.							
Full Name:	Relationship:							
Company:	Phone:							
Address:								
Full Name:	Relationship:							
Company:	Phone: ( )							
Address:								
Full Name:	Relationship:							
Company:	Phone: ( )							
Address:								
Previous Employment								
Company:								
, ,								
Address: _	Supervisor:							
Job Title:	Starting Salary: \$ Ending Salary: \$							
Responsibilities								
From:	To:Reason for Leaving:							
May we contact your previous supervisor for a reference?								
Company:	Phone:(							
Address: _	Supervisor:							
Job Title: _	Starting Salary: \$ Ending Salary: \$							
Responsibilities	:							
From:	To:Reason for Leaving:							
May we contact your previous supervisor for a reference?  YES  NO								
Company:	Phone: ( )							
Address:	Supervisor:							
Job Title: _	Starting Salary: \$ Ending Salary: \$							
Responsibilities:								
From:	To:Reason for Leaving:							
May we contact your previous supervisor for a reference?								

## PLEASE ANSWER THE FOLLOWING QUESTIONS IN PARAGRAPH FORM.

- 1. Please describe in your own words your definition of work ethics and how they will aid you in achieving your personal goals.
- Please describe the traits of being a good team member.
   Please describe any special attributes you may have that will set you apart from other applicants.
- 4. Please describe how offering a level of attentive personal service may benefit you in the future.