



# Elk River Pizza Man Corporation

## Equal Employment Opportunity Application

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

### Applicant Information

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Position Applied for: \_\_\_\_\_ Are you 18 or older? \_\_\_\_ DOB (if under 18) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

E-Mail Address: \_\_\_\_\_

#### IN CASE OF EMERGENCY, NOTIFY:

Name: \_\_\_\_\_ Phone #: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

### Availability and Experience Information

Date you can start: \_\_\_\_\_ Are you currently employed? \_\_\_\_ Hours requested: \_\_\_\_\_

Availability:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

**NOTE:** All employees must work at least one weekend night.

Do you have any previous pizza or restaurant experience? \_\_\_\_\_

If yes, when and where? \_\_\_\_\_

Have you ever worked for Elk River Pizza Man Corp? \_\_\_\_ If yes, when? \_\_\_\_\_

Name of last supervisor: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Do you have any physical impairments which would interfere with your ability to do the job that you have applied for?  
\_\_\_\_\_

### Employment Information

Name and Address of present or last employer: \_\_\_\_\_

Start date: \_\_\_\_\_ Leave date: \_\_\_\_\_ Starting wage: \_\_\_\_\_ Final wage: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_ May we contact? \_\_\_\_ Phone #: \_\_\_\_\_

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

Name and Address of present or last employer: \_\_\_\_\_

Start date: \_\_\_\_\_ Leave date: \_\_\_\_\_ Starting wage: \_\_\_\_\_ Final wage: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_ May we contact? \_\_\_\_ Phone #: \_\_\_\_\_

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

**Vehicle Information (If Applied for Driver, Supervisor, or Manager)**

Vehicle Info: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
VIN #: \_\_\_\_\_ Plate #: \_\_\_\_\_  
Driver's License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State Issued: \_\_\_\_\_  
Insurance Company: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ State: \_\_\_\_\_  
Agent's Name, address, and phone #: \_\_\_\_\_  
Amount of Liability Coverage: \_\_\_\_\_

List all traffic violations within the last 3 years, excluding parking violations. Include date, violation, and penalty:  
\_\_\_\_\_

**Employee/Driver Agreement**

I have completed the above data regarding my driving record and represent that the above information is complete and accurate. I authorized Elk River Pizza Man Corporation to obtain my MVR to verify the information above. I understand that my record may be verified periodically at the company's discretion and also, if my record does not meet company requirements, I can be terminated from my employment.

I understand that I must have liability coverage while I am driving for Elk River Pizza Man Corporation and that Elk River Pizza Man Corporation is not responsible for any physical damage to my vehicle.

I understand the importance of safety and agree to the following safety policies while working:

- 1. To obey all traffic laws at all times.
- 2. To keep my car in safe working order and if it is not in good order, I understand that I can be taken off the road.
- 3. To wear my safety belt at all times.
- 4. To not eat or drink while driving.
- 5. To place the hot box and drinks in the prescribed area of the vehicle.
- 6. To never drive after having consumed drugs or alcohol.
- 7. No person other than **on-the-job** employees and authorized security personnel are permitted to ride in my delivery vehicle, either company owned or personal, while making deliveries.
- 8. To bring my vehicle to a **complete and safe stop** any time I use a spotlight or lamp.
- 9. I understand that if management requires that I take a driver's safety class, failure to do so may result in termination of my employment.
- 10. To use company delivery vehicles for business only. No company delivery vehicle is to be taken home overnight without prior regional office or supervisor approval.
- 11. **To notify Elk River Pizza Man Corporation when I have received a ticket or been arrested for any driving-related offenses.**
- 12. **To notify Elk River Pizza Man Corporation when my driving privileges have been suspended, revoked, or restricted.**
- 13. **To notify Elk River Pizza Man Corporation when there has been any change in my car insurance.**
- 14. To promptly report to my manager any incident involving the use of a car while I am working, whether or not it results in any injury to any person or damage to any vehicle or other property, and regardless of who I believe is at fault.
- 15. To always drive courteously and practice defensive driving techniques.
- 16. To only drive the insured car listed above or designated company vehicle, unless prior approval has been obtained.

**I have read and understand the above employee/driver agreement.**

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

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, false statements on this application shall be grounds for dismissal.

I authorized investigation of all statements contained herein. I further authorize all listed references to give you any and all information concerning my previous employers and any 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.

I understand and agree that if hired, my employment is for no definite period and may be terminated at any time for any reason without prior notice.

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