



Santino's Employment Application

This employment application is for employment with Santino's, Inc. Santino's employment policy is to provide an equal employment opportunity for all qualified employees and applicants without regard to race, color, religion, sex, national origin, sexual orientation, age, weight, marital status or handicap/disability.

We appreciate your interest in our company and assure you that we are interested in your qualifications. A clear understanding of your background and work history will help us to determine if you match our job requirements for a position at Santino's. If you are called in for an interview, please take the time to ask all the questions you have that will help you decide if there is a good match between your capabilities and interests and our company. We will be looking for the same good fit.

Date: ___/___/___

Name: (Last, First, Middle Initial) _____

Social Security No. _____ - _____ - _____ Home Phone No. _____

Address: _____ City _____ State _____ Zip _____

_____ Permanent Address: (for tax purposes) _____ City _____

State _____ Zip _____

In case of emergency, notify: Name _____ Phone: _____

Date You Can Start? ___/___/___ Compensation or hourly wage expected: _____

Are you interested in: Part-time Work Full-time Work Either

How many hours would you like to work per week? Minimum _____ Maximum _____

Days and Hours Available	Days	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
	From							
	To							

Are you 18 years of age or older? Yes___ No___ If not, please give date of birth ___/___/___

Education	Name of School	Last Year Completed	Last Year Attended	Major
High School		9 10 11 12 Graduated? Yes___ No___		
College		1 2 3 4 Graduated? Yes___ No___		

The three best reasons why Santino's should hire me?

1.

2.

3.

Employment History
(Start with Most Recent Employer)

Employers' Name/Address/Phone No.	Dates Employed		Positions Held:	
	From:	To:	Supervisor's Name:	
	Compensation			Reason for Leaving:
	Start:	Final:		
Employers' Name/Address/Phone No.	Dates Employed		Positions Held:	
	From:	To:	Supervisor's Name:	
	Compensation			Reason for Leaving:
	Start:	Final:		
Employers' Name/Address/Phone No.	Dates Employed		Positions Held:	
	From:	To:	Supervisor's Name:	
	Compensation			Reason for Leaving:
	Start:	Final:		

Were you ever discharged/fired by any company? No ___ Yes ___

References (No relatives please)		
Name & Title or Position	Phone No.	Occupation

Why did you apply at Santino's?

How long do you plan to work at Santino's? _____

Are you a U.S. Citizen? Yes No

Do you have a legal right and necessary papers to work in the United States? Yes No

Do you have any medical condition which would prevent you from performing the responsibilities of the job, which may include, but are not limited to, heavy lifting, bending, reaching for products, handling food, etc.? Yes No

If YES, please explain:

Other than a minor traffic violation, have you ever been convicted of a crime? Yes No

Do you currently have any charges pending against you? Yes No

Applicant's Statement

IMPORTANT-- READ CAREFULLY BEFORE SIGNING.

I give my word that the facts in this Application for Employment are true and complete. I hereby authorize investigation of all statements contained in this application and full disclosure of my present and prior work record. I grant permission to Santino's to obtain information concerning my general reputation, motor vehicle and criminal records, character, conduct, work quality, reliability and ability to take direction from others. I further authorize any person or organization contacted to furnish information and opinions regarding my qualifications for employment. I understand that Santino's, Inc. has the right to refuse to hire or immediately discharge me, at any time, if it discovers that I have provided incomplete, untrue, or misleading answers or information in this application or any other documents I complete while under the company's employment.

I HEREBY CERTIFY THAT I AM NOT ENGAGED IN THE ILLEGAL USE OF DRUGS, AND THAT I DO NOT USE DRUGS AND/OR ILLEGAL SUBSTANCES. I UNDERSTAND THAT IF I AM FOUND, WHILE IN THE STORE OR ON THE PREMISES (DURING OR OUTSIDE OF WORKING HOURS), TO BE UNDER THE INFLUENCE OF ALCOHOL OR ILLEGAL SUBSTANCES, I WILL BE IMMEDIATELY TERMINATED AND, IN THE CASE OF ILLEGAL SUBSTANCES, THAT THE PROPER AUTHORITIES WILL BE NOTIFIED.

I agree to refrain from smoking in the store, and that if I must smoke, I will not do it in the general vicinity of the front of the store or on the patio.

I agree that I will adhere to the terms and conditions of this employment application and to other pre-employment and post-employment documents which I sign. I also agree that, under no circumstances, will I discuss my rate of pay, or the rates of pay of others, with any other Santino's employee other than the business owners. Discussions regarding pay rates with anyone but the business owners will result in immediate dismissal.

I agree that I will study-for, and pass, the State-required Employee Food Handler's Test within 90 days of being hired. If I do not take the test, or fail to pass the test, I may be terminated and the cost of the test booklet, shipping & handling will be deducted from my final paycheck.

I also understand and agree that I AM AN EMPLOYEE AT WILL, and that as AN EMPLOYEE AT WILL, I may be terminated at any time, for any reason, with or without cause.

Signature_____

Date_____

**BACKGROUND AND REFERENCE INVESTGATION
AUTHORIZATION AND REEASE FOR EMPLOYMENT PURPOSES**

As part of its employment screening and selection procedures, Richcor, Inc.d/b/a Santino's (hereafter referred to as "Company") requires that a background investigation and a check of references be conducted. The objectives of the investigation are to verify information provided during the application process, investigate references and identify any factors that might be inconsistent with Company employment requirements.

I, _____ give Company and / or its designees Permission and

(Applicant's name)

authority to conduct a background investigation and reference check into my past and current activities. I understand and consent to an investigation that may include, but not limited to, information as to my personal character, general reputation, verification of previous employment and employment references, verification of education, motor vehicle driving record, criminal records and other information contained in public records.

I authorize and request any Former Employers, Schools, Police Departments, States, Cities and Counties, or any other Person to furnish Company and / or its designees information concerning:

My Work Habits	Character	Criminal Record
Reasons for Termination	Reputation	Driving Record
Salary History	Education History	

And all other relevant information requested by Company.

I hereby release all persons, Companies, Corporations, Schools or Individuals from all liability and responsibility that may result from providing Company and / or its designees with such information as requested.

Applicant

Social Security Number

Current Street Address

City, State, Zip Code

Driver's License Number / Issuing State

Date of Birth

Signature

Date

PLEASE NOTE: *The Age Discrimination in Employment Act of 1967* prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.