

APPLICANT INFORMATION										
Last Name			First			M.I.		Date		
Street Address							Apt/Unit #			
City				State			ZIP			
Phone			E-mail Address							
Date Available to Start		Shifts Available		SUN	MON	TUE	WED	THU	FRI	SAT
Circle Position(s) Applying for:		Pizza Maker	Sandwich Maker	Cashier	Catering	Counter help	Dish-washer	Line Cook	Manager	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?						
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain.						
Are you under the age of 18?		YES <input type="checkbox"/>	NO <input type="checkbox"/>							
What languages do you speak?					Read?					

EDUCATION						
High School		Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Courses	
College		Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other		Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/Certificate	

REFERENCES	
<i>Please list two professional and one personal reference.</i>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

PREVIOUS EMPLOYMENT			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Rate \$	Ending Rate \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous employer for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Rate \$	Ending Rate \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous employer for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Rate \$	Ending Rate \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous employer for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From                      To
Rank at Discharge	Type of Discharge
If other than honorable, please explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to my employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date



*Viga is an equal opportunity employer and does not discriminate on the basis of age, color, national origin, race, religion, sex, marital*