PERSONAL INFORMATION

Date	Social Security Number	
Name	[first]	(middle)
Street Address		
City	State	Zip
Telephone	Email	
How did you hear abo	out job opportunities at Frankies?	
Do you know any curre	ent or former employees of Frani	kies? Yes No
If yes, who?		
Why are you intereste	ed in working at Frankies?	
Position you are applyin	g for	
Number of hours you wo	ould like to work weekly	
Specific shifts you would	d like	
Please describe your re	elevant work experience	
What skills, interests work at Frankies?	or experience make you unique	ely qualified for
Have you ever eaten	at Frankies? If yes, what is you	ır favorite pizza?
What are your favorite r	restaurants in the Twin Cities?	
When not working, wha	t do you like to do?	
Have you ever been disc	charged by an employee? Yes	No
If yes, please explain all	l employment terminations	
List the periods during v	which you were unemployed	
How did you spend this	time? Please be specific	



EMPLOYMENT APPLICATION

JOBS

Delivery Driver • Counter Staff • Cook
Please visit www.frankiespizza.com
for store locations

EMPLOYMENT HISTORY

Please start with your most recent or present employer

1.	Employer	Telephone
	Address	
	Position Title	
	Supervisor's N	ame and Title
	Weekly Wage	(starting) (end) Employed (MM/YY) (from) (to)
	Describe the	work you did that could be applied at Frankies
	Please explain	your reasons for leaving
2.	Employer	Telephone
	Address	
	Position Title	
	Supervisor's N	ame and Title
	Weekly Wage	(starting) (end) Employed (MM/YY)(from) (to)
	Describe the	work you did that could be applied at Frankies
	Please explain	your reasons for leaving
3.	Employer	Telephone
	Address	
	Position Title	
	Supervisor's N	ame and Title
	Weekly Wage	[starting] [end] Employed [MM/YY]
	Describe the	work you did that could be applied at Frankies
	Please explain	your reasons for leaving

EDUCATION

Name and Address			
Years Completed	Did you graduate?	Yes	No
Extracurricular Activities			
2. COLLEGE / VOCATIONAL			
Name and Address			
Years Completed	Did you graduate?	Yes	No
Course of Study	Degree Earned		
Extracurricular Activities			
3. OTHER			
Name and Address			
Years Completed	Did you graduate?	Yes	No
Course of Study	Degree Earned		
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Applicant's Signature _____ Date ____