



EMPLOYMENT APPLICATION

The Shops at Falmouth Village | 240 US Route One | 781.3100 | Fax 781-7090

RICETTAS.COM

Download fillable pdf, fill out, save file with your name and email to personnel@ricettas.com

PERSONAL INFORMATION

Date _____ Name _____

Present Address _____ City, State, Zip _____ Home Phone _____

Permanent Address _____ City, State, Zip _____ Other Phone _____

Email _____ Do any of your relatives currently work for Ricetta's? Yes No Previously Employed? Yes No

If Yes, Name _____ Position _____ Dates Of Employment _____

Were You Referred To Us By Anyone? Yes No If Yes, Name _____ Phone _____

EMPLOYMENT DESIRED

Positions _____ Full Time Part Time Desired Wage \$ _____ /Hour

Are you currently employed? Yes No If so, may we inquire of your present employer? _____

Have you applied to Ricetta's before? Yes No If so, when? _____ Position applied for? _____

AVAILABILITY

I am available for all shifts How many hours per week would you like to work? _____

I am available to work on:

Sunday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	Monday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	Tuesday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner
Wednesday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	Thursday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	Friday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner
		Saturday: <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner

EDUCATION

(*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age for individuals 40 years of age or older)

HIGH SCHOOL

Name: _____ Major _____ *Grad Date: _____

Address: _____ City, State, Zip _____

COLLEGE

Name: _____ Major _____ *Grad Date: _____

Address: _____ City, State, Zip _____

TRADE, BUSINESS OR CORRESPONDENCE SCHOOL

Name _____ Major _____ *Grad Date: _____

Address: _____ City, State, Zip _____

OTHER ACTIVITIES (Exclude organizations, which indicates the race, creed, sex, marital status, age, color or national origin of its members)

Civic Duties _____ Volunteer or Charity Work _____

Sports Interests _____ Hobbies _____

Other _____

EMERGENCY INFORMATION (Please list your nearest living relative for us to contact in case of an emergency)

Name _____ Relation _____

Address _____ City, State, Zip _____ Phone _____

RELATED WORK EXPERIENCE (Please list your last three employers, starting with your most recent one first)

EMPLOYER 1

Name _____ Phone _____

Address _____ City, State, Zip _____

Position _____ Please describe your duties _____

Start Date (Mo., Yr.) _____ End Date (Mo., Yr.) _____ Beginning Wage _____ Ending Wage _____ Hours/Week _____

Supervisor _____ May we contact employer? Yes No

Reason for Leaving _____

EMPLOYER 2

Name _____ Phone _____

Address _____ City, State, Zip _____

Position _____ Please describe your duties _____

Start Date (Mo., Yr.) _____ End Date (Mo., Yr.) _____ Beginning Wage _____ Ending Wage _____ Hours/Week _____

Supervisor _____ May we contact employer? Yes No

Reason for Leaving _____

EMPLOYER 3

Name _____ Phone _____

Address _____ City, State, Zip _____

Position _____ Please describe your duties _____

Start Date (Mo., Yr.) _____ End Date (Mo., Yr.) _____ Beginning Wage _____ Ending Wage _____ Hours/Week _____

Supervisor _____ May we contact employer? Yes No

Reason for Leaving _____

PERSONAL REFERENCES (Please list two persons, not related to you, whom you have known for at least one year)

REFERENCE 1

Name _____ Phone _____

Address _____ City, State, Zip _____

Profession _____ Years Known _____

REFERENCE 2

Name _____ Phone _____

Address _____ City, State, Zip _____

Profession _____ Years Known _____

AUTHORIZATION (Please read the disclaimer below. If you agree with the terms, please sign and date where indicated)

I authorize the investigation of any and all statements contained in this application. I understand that misrepresentation or omission of facts called for is just cause for immediate dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the payment date of my wages, be terminated at any time without any previous notice.

Applicant's Signature: _____ Date: _____