



Little Caesars® Pizza

APPLICATION FOR CREW MEMBER EMPLOYMENT

Last Name	First Name	Middle	Date of Application	
Street/P.O. Box	Apt. #	City	State	ZIP
Day Phone No.	Evening Phone No.		Social Security No.	
Please list and other names you have used.			<input type="checkbox"/> Crew Member	<input type="checkbox"/> Full-Time
			<input type="checkbox"/> Delivery Driver	<input type="checkbox"/> Part-Time
Emergency Contact's Name	Home Phone No.	Work Phone No.		
Street/P.O. Box	Apt. #	City	State	ZIP

Personal

- Are you at least 18 years old?
If no, please list birth date. _____ Yes No
- Do you have the legal right to remain and work in the United States?
(Authorization for employment and Proof of Identity required upon employment) Yes No
- Have you ever been employed by Little Caesars before? Yes No
If so, when? _____ City _____ State _____
Who was your immediate supervisor/owner? _____
Why did you leave? _____
- What prompted you to apply for work here? Company Image Agency
 Friend Employee Referral Newspaper Other _____ Yes No
- Have you ever been convicted of a felony? Yes No
If yes, please explain all convictions. _____

- What are your personal interests or hobbies? _____

- Job-related organizations, clubs, professional societies. (Omit those which indicate sex, race, religion, creed, color, national origin, ancestry, and/or age.) _____
- Is any member of your family (spouse, parent, etc.) employed in the restaurant industry? Yes No
If yes, explain. _____

Education

	Name and Location of School	Dates Attended (From/To)	Circle Highest Year Completed	Major and Minor Fields of Study	Degree(s) or Diploma
High School			9 10 11 12		
Technical/Vocational					
College/University			1 2 3 4		
Other					

Honors Received

Availability for Work

9. What hours or shifts are you available for work? Please note both hours available and hours unavailable to work in the table below.

Availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Available							
Not Available							

10. Do you have any obligations which would affect working as scheduled? Yes No

If yes, please explain. _____

11. How soon after accepting an offer would you be able to start working? _____

Other Notes or Comments:

Experience

	Job 1	Job 2	Job 3
Employer			
Address/Location (Include City, State, & ZIP)			
Dates Employed	From _____ to _____ Mo/Yr Mo/Yr	From _____ to _____ Mo/Yr Mo/Yr	From _____ to _____ Mo/Yr Mo/Yr
Position(s) Held			
Supervisor's Name			
Phone Number			
Starting Salary/Wages	\$ _____	\$ _____	\$ _____
Final Salary/Wages	\$ _____	\$ _____	\$ _____
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Responsibilities			
Reason for Leaving			

I represent that the above information, and other information I may be required to provide, is complete and accurate and any misstatement or omission may result in rejection of my application or termination of employment. I authorize LCE to conduct, at its discretion, felony conviction and motor vehicle record searches. I authorize my references and any state or local agency to release any information they may have regarding me to Little Caesars Enterprises, Inc. ("LCE") and I release all parties from any liability for requesting and/or providing such information.

I agree that if I am hired, my employment may be terminated at any time for any reason at all with or without notice by me or LCE. I agree that only the President of LCE has authority to enter into an employment arrangement other than "at will" and it must be in writing and signed by the President and me.

I agree to keep confidential all proprietary information I learn about LCE by virtue of my employment with LCE and shall not disclose it or use it for my own personal gain or for the benefit of a third party.

Signature

Date

This application was designed to comply with Federal Civil Rights Act, Title VII, the Age discrimination Act of 1967, The Americans with Disabilities Act, The Civil Rights Act of 1991 and State Fair Employment Practice Laws. Therefore, no question answered is or will be used to discriminate adversely in matters of race, color, marital status, national origin, religion, age, sex, disability, Veteran status, or any other characteristics protected by state or local laws.

Applications are effective for 60 days, after which you must reapply.