

Customer Service Experience

List things you have enjoyed about previous jobs.

List things you have *not* enjoyed about previous jobs.

List three reasons why you enjoy working with people.

- 1. _____
- 2. _____
- 3. _____

Describe the type of work atmosphere you enjoy.

List three characteristics that best describe you as an employee.

- 1. _____
- 2. _____
- 3. _____

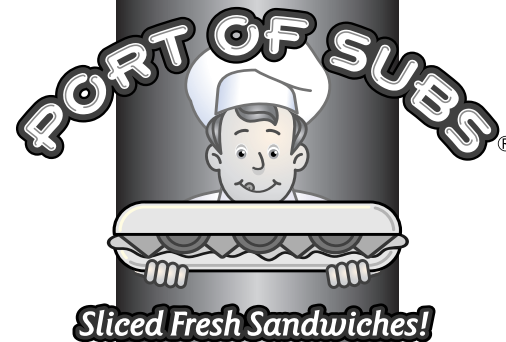
**IMPORTANT
(Please review and sign)**

The facts set forth in this application are true and correct. I understand that if employed, any false or misleading statements, omissions or failure to fully answer any question will result in my immediate dismissal, regardless of when such information is discovered. I agree to submit myself at any time upon request for medical examination and/or testing (including drug testing). I authorize Port of Subs and my former employers to verify employment and educational references in connection with my application for employment and subsequently as Port of Subs deems appropriate.

I understand and agree that nothing contained in any Port of Subs handbook, manual, rules or regulations, practice, policy, etc., shall be deemed to create an employment contract between myself and Port of Subs. It is further understood and agreed that my employment relationship with Port of Subs is at will and may be terminated on any day by myself or Port of Subs for any reason, without liability. I represent that I am not relying upon any promises or representations regarding either the nature or duration of my employment in accepting employment if it is offered to me. I understand that no supervisor, manager or other representative of Port of Subs has any authority to enter into any express or implied contract. I further understand and agree that no promise, representation, inducement or agreement contrary to the above is binding unless it is in writing, expressly states that it is a contract and is signed by the owner of Port of Subs.

I CERTIFY THAT I HAVE REVIEWED THE ABOVE, UNDERSTAND IT AND AGREE TO IT.

Signature of applicant (do not print)



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Personal Information

Today's Date: _____

Last name: _____

First name: _____ M.I.: _____

Address: _____

_____ How long: _____

Telephone: (_____) _____

Previous address: _____

_____ How long: _____

Other names you have worked under:

Are you able to perform the essential function of the position for which you are applying? yes no
If no, please explain: _____

Are you at least 18 years of age?
 yes no

Work Information

Position desired: _____

Number of hours per week: _____

Available days/hours if part time: _____

Salary desired: _____

Previous Port of Subs Employment:

Location: _____

Dates from: _____ to: _____

Have you ever been convicted of a crime?

yes no

Type of conviction: _____

Date: _____

Charge: _____

Disposition of case: _____

Employment History

From: _____ **to:** _____

Company name: _____

Address: _____

Phone: (_____) _____

Job title: _____

Pay rate: _____ per: _____

Supervisor name: _____

Job duties: _____

Reason for leaving: _____

From: _____ **to:** _____

Company name: _____

Address: _____

Phone: (_____) _____

Job title: _____

Pay rate: _____ per: _____

Supervisor name: _____

Job duties: _____

Reason for leaving: _____

From: _____ **to:** _____

Company name: _____

Address: _____

Phone: (_____) _____

Job title: _____

Pay rate: _____ per: _____

Supervisor name: _____

Job duties: _____

Reason for leaving: _____

Account for any gaps in employment:

From: _____ **to:** _____

Reason: _____

From: _____ **to:** _____

Reason: _____

School Information

High School

Name: _____

Address: _____

Number of years completed: _____

College

Name: _____

Address: _____

Number of years completed: _____

Degree: _____

Special Training or Skills

Extra Curricular Activities

(You may omit those which indicate your race, color, religion, sex, national origin, age, handicap/disability, veteran's status or union affiliation.)

List the names and telephone numbers of three references.

Name: _____

Phone: (_____) _____

How do you know this person? _____

Name: _____

Phone: (_____) _____

How do you know this person? _____

Name: _____

Phone: (_____) _____

How do you know this person? _____