



Better Ingredients  
Better Pizza

# Application

DATE: \_\_\_\_\_

POSITION APPLIED FOR:

Management       Driver       In-Store Restaurant

Full Time       Part Time

Days/Hours \_\_\_\_\_

Name \_\_\_\_\_ SSN# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Street Address/City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Are you under 18?     yes     no  
If YES, your date of birth \_\_\_\_\_

Are you entitled to work in the United States?       yes     no

Have you worked at any Papa John's before?       yes     no

If yes, please give dates, location: \_\_\_\_\_

How did you learn about this position? \_\_\_\_\_

Do you have a relative working at Papa John's?       yes     no

If so, in what department? \_\_\_\_\_

## PRIOR WORK EXPERIENCE (Please list most recent employment first)

1. Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Position (duties): \_\_\_\_\_ Phone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Can we contact? \_\_\_\_\_

Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_ Dates: \_\_\_\_\_ to \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Position (duties): \_\_\_\_\_ Phone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Can we contact? \_\_\_\_\_

Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_ Dates: \_\_\_\_\_ to \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Have you ever been convicted of, or pleaded guilty or no contest (nolo contendere) to a felony offense?     yes     no

If yes, please provide: Date of birth: \_\_\_\_\_ Date of conviction: \_\_\_\_\_

County/State in which felony occurred: \_\_\_\_\_ Facts surrounding the conviction: \_\_\_\_\_

LIST SPECIAL SKILLS/EDUCATION/TRAINING: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Personal References (Not relatives or former employers)

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Please review the duties of this position as outlined in the Job posting/description. Can you perform the essential functions of this job?  Yes  No

**DELIVERY DRIVERS ONLY:** If you are employed as a delivery driver by Papa John's International, Inc or any of its subsidiaries ("Papa John's") then you are required to maintain personal Auto Liability insurance at the mandatory state liability limits for the state in which you will be driving. You shall also be solely responsible for maintaining at your cost, such comprehensive and auto collision coverage as you deem necessary to cover your vehicle. Papa John's is not responsible for, and you assume all risk of, any loss, theft, vandalism or property damage to your vehicle and contents while being used in connection with your employment with Papa John's. You will be required to provide Papa John's with a valid copy of your insurance policy or Declaration Page and proof of payment due premium when you are hired and again upon each renewal. We reserve the right, and you authorize Papa John's or its agents, to contact your insurance agent and/or carrier either verbally or in writing, or both, to confirm the type and amount of your coverages and the amount through which premiums have been paid. **In addition, your Motor Vehicle Report (MVR) will be checked, at the time of application and periodically thereafter, to verify your driving eligibility, and this serves as our authorization to do so.** If you are applying for a delivery driver position in Tennessee, Georgia, North Carolina, South Carolina, Virginia, District of Columbia, New Mexico, Texas, Pennsylvania, Kansas, or Colorado, we will need your date of birth to run an MVR report. \_\_\_\_\_

(Birthdate)

Insurance Company Name: \_\_\_\_\_ Policy Exp. Date: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Have you had at least six months driving experience in the US?  Yes  No

Have you ever been convicted of a crime involving a motor vehicle, including vehicular homicide or assault?  Yes  No

In the last 5 years, have you ever received a violation for DUI or open container/chemical test failure/ possession of a controlled substance?  Yes  No

Has your driver's license ever been suspended or revoked?  Yes  No If yes, please explain: \_\_\_\_\_

**VEHICLES WHICH WILL BE USED ON THE JOB:**

1. Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License#: \_\_\_\_\_ State: \_\_\_\_\_

2. Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License#: \_\_\_\_\_ State: \_\_\_\_\_

**CERTIFICATION:** Papa John's International and its subsidiaries are Equal Opportunity Employers. Any person applying for a position with Papa John's or its subsidiaries will be considered for the position for which they have applied without regard to race, religion, age, sex, national origin or disability.

I certify that all statements made in this application are true and complete and authorize Papa John's to investigate all statements made from all prior employers, references and law enforcement agencies. I hereby release all those persons, employers, references, agencies and Papa John's from any and all liability arising from their giving or receiving information about my employment history, qualifications or criminal record. I further authorize Papa John's to conduct whatever background checks are necessary to either verify information provided by me on this application or in interviews relating to prospective employment, or to verify any material change in my background subsequent to my employment. In the event that my employment is rejected or terminated by Papa John's based on a report received from such a background check. I understand I will receive a full copy of such report and will have an opportunity to dispute the accuracy of the information included in such report.

I understand that any false answers or statements or misrepresentations by omission made by me as part of my application will be sufficient for rejection of my application or for my immediate discharge should one be discovered after I am employed.

I understand that nothing in this employment application, in Papa John's statements of personnel policies or in my communication with any employee or official is intended to create an employment contract between Papa John's and me, and that my employment with the company is entered into voluntarily, and that I may resign at any time. Similarly, my employment may be terminated with or without cause at any time without prior notice.

I hereby acknowledge that I have read and understand the preceding statement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_