

Store Address: Quiznos Sub 300 S. Craig Street Pittsburgh, PA 15213 Phone: 412-622-7200

## Application for Employment

This Quiznos Sub Store is Independently Owned and Operated By Q-Sub Systems, LLC

Name: (Last)		<u>(First)</u>		(Middle Initial) Social Security Number:					
Local Address:									
Street Address:			<u>City:</u>		<u>State:</u>	Zip Code:	<u>Cοι</u>	<u>ıntry:</u>	
Home Address: (If different from lo	ocal address	s)							
Street Address:			<u>City:</u>		<u>State:</u>	Zip Code:	<u>Co</u>	intry:	
Phone Number:	Mobile Phone	e Number:		E-Mail Addre	<u>ISS:</u>				
Are you a citizen of the U.S. or do	o you	Yes	No	Any offer of employment is conditional upon you				you	
have a legal right to work in the U.S.?				completing Form I-9 and providing documents establishing your identity and work authorization.					
Are you 18 years of age or older?		Yes	No	If under 18 years of age, applicant will be required to					
				submit a birth certificate or work certificate as required by State or Federal law.					
Have you ever pleaded "guilty", Yes			No	If "Yes", When and Where?					
"no-contest" or been convicted of a crime?				]					
If "Yes", please provide details:									
ype of employment desired: Full-Time		Part-Time		Date Available To Start:					
How many hours per week would you like to work?			How far do you live from the restaurant?						
How were you referred to us?									
Availability									
Hours Available To Work		Mon	Tue	Wed	Thur	Fri	Sat	Sun	
From:									
To:									
From:									
To:									
From:									
To:									

## Education

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Are you presently enrolled in school?		Yes		No 🗌				
If yes, please provide name and address of the school you are attending:								
School Name and Address:			<u>Type Of Degree or</u> <u>Program:</u>		Expected Completion Date:			
Did you successfully complete high school and receive a diploma?	Yes	No	If you did not complete high school, do you have a Yes N   high school equivalency diploma (GED)? I I			No		
Name and address of last school attended:								
School Name and Address:		<u>Dates A</u> From:	<u>ttended:</u> To:	Did You Graduate?Date OfYesNoDegree:			<u>Major:</u>	
List any other education, degrees, special skills, qualifications or certifications:								

**Employment History** 

Company Name and Address:			<u>Job Title:</u>		
Company Phone Number:	Supervisor Name:	Dates Of E	mployment:	From:	To:
Last Pay Rate:	Reason For Leaving (If Applicable):	May We C	Contact This	Yes:	No:
		Empl	oyer?		
Company Name and Address:			<u>Job Title:</u>		
Company Phone Number:	Supervisor Name:	Dates Of E	mployment:	From:	To:
Last Pay Rate:	Reason For Leaving (If Applicable):	May We C	Contact This	Yes:	No:
		Empl	oyer?		

## References

Name:	Address:	Phone:	Relationship To You:

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations of all statements contained in this application including education, prior employment, financial, criminal background and other related matters as may be necessary for an employment decision. I hereby release schools, employers, law enforcement agencies, credit bureaus or individuals from all liability when responding to inquiries in connection with this application for employment. If I should be employed by the Company, I understand that any false, incomplete, or misleading information given on this application or during an interview could result in immediate discharge.

In the event that I am employed by the Company, I understand that my continued employment will depend upon the successful completion of work assigned to me during a new hire probationary period of up to ninety (90) days and upon my continued successful job performance. I understand and acknowledge that unless otherwise defined by applicable law or written agreement with Company, any employment relationship with the Company is considered "employment at will", which means the Employee may resign at any time and the Employer may discharge the Employee at any time, with or without cause.

Signature of Applicant:	Date: