



860 FRANKLIN AVE • GARDEN CITY • NY 11530 • 516.739.7660

DATE _____

**APPLICATION FOR EMPLOYMENT
PRE-EMPLOYMENT QUESTIONNAIRE/EQUAL OPPORTUNITY EMPLOYER
PERSONAL INFORMATION**

NAME (LAST NAME FIRST) SOCIAL SECURITY NO.

PRESENT ADDRESS CITY STATE ZIP CODE

PERMANENT ADDRESS CITY STATE ZIP CODE

PHONE NO. () REFERRED BY

POSITION SOUGHT CIRCLE ONE: FULLPART TIME

FORMER RESTAURANT EMPLOYMENT

- 1. _____
(NAME) (CITY) (POSITION) (DATE)
- 2. _____
(NAME) (CITY) (POSITION) (DATE)
- 3. _____
(NAME) (CITY) (POSITION) (DATE)

EDUCATION

NAME AND LOCATION OF SCHOOL YEARS ATTENDED DID YOU GRADUATE
SUBJECTS

GRAMMAR/H.S. _____

COLLEGE _____

TRADE, OR
BUSINESS

OTHER

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING SKILLS

U.S. MILITARY OR NAVAL SERVICE

RANK

GENERAL

1. Which of the restaurants you have worked at taught you the most about fine dining service and why?

2. Which taught you the most about food and wine? Why?

3. Which restaurant are you proudest to have worked at? _____

The least proud? _____

Please explain:

4. Which restaurants have you left by choice and why?

5. Which restaurants chose to let you go and why?

6. What did you learn from these experiences?

7. How will your next job have to be different from your last or present job to make it more challenging and interesting for you?

8. What do you like most about working in restaurants?

9. Which aspect do you least enjoy?

10. How do you define great service?

11. To help us get to know you better, please rank yourself on a scale of 1-10 in the following areas:

___ beer knowledge ___ salesmanship ___ team player

___ wine knowledge ___ friendliness ___ communications

___ food knowledge ___ plate carrying ability ___ fine service finesse

___ perseverance

11a. Are you willing to educate yourself on over 100 wines and over 20 beers, in addition to the history and culture of Italy and its foods?

_____ Yes

_____ No

12. Are you willing and able not to smoke while working or on the premises of our restaurant? _____

13. What activities or career goals do you pursue outside the restaurant business?

14. How has your sense of humor been valuable to you in the restaurant business?

15. Optional: Tell us a little about yourself: (Hobbies, birthday, any comments).

16. Please give the name and current phone number of two of your past restaurant employers who can give us an accurate perspective on you as a potential employee of Novità.

1. _____
(RESTAURANT NAME) (SUPERVISOR/POSITION) (PHONE #)

2. _____
(RESTAURANT NAME) (SUPERVISOR/POSITION) (PHONE #)

REFERENCES

LIST BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR:

1. _____
Name Address Business Years known

2. _____
Name Address Business Years known

The above information is true to the best of my knowledge and I authorize Novità. to check the references I have provided.

_____ Signature/Date