



# EMPLOYMENT APPLICATION

APPLICANT INFORMATION													
Last Name			First			M.I.		Birth Date					
Street Address						Apartment/Unit #							
City				State		ZIP							
Phone				E-mail Address									
Date Available			Social Security No.			Desired Salary							
Position Applying for													
Store Applying for: (check all that apply)			<input type="checkbox"/> Glastonbury			<input type="checkbox"/> West Hartford			<input type="checkbox"/> Simsbury				
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?						
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain						
AVAILABILITY													
Looking For: (check all the apply)			<input type="checkbox"/> Full time			<input type="checkbox"/> Part Time			<input type="checkbox"/> Seasonal				
Mon		Tues		Wed		Thurs		Fri		Sat		Sun	
Other Comments													
EDUCATION													
High School				Address									
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
College				Address									
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
Other				Address									
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
REFERENCES PLEASE LIST THREE PROFESSIONAL REFERENCES.													
Full Name				Relationship									
Company				Phone ( )									
Address													
Full Name				Relationship									
Company				Phone ( )									
Address													
Full Name				Relationship									
Company				Phone ( )									
Address													

<b>PREVIOUS EMPLOYMENT</b>										
Company					Phone	( )				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Company					Phone	( )				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Company					Phone	( )				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>					
<b>MILITARY SERVICE</b>										
Branch					From		To			
Rank at Discharge					Type of Discharge					
If other than honorable, explain										
<b>DISCLAIMER AND SIGNATURE</b>										
I certify that my answers are true and complete to the best of my knowledge.										
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.										
Signature							Date			