

EMPLOYMENT APPLICATION



P.O. Box 1511
Hartford, CT, 06144
860-688-0034
Cattleya1031@gmail.com

Equal access to programs, services and employment is available to all persons. Applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Dept.

Date of Application:

Position(s) Applied for:

Name (Last, First, MI):

D.O.B:

Telephone #:

Social Security #:

Driver's License # & State:

Emergency Contact Information: Name

Address

Telephone Number of Emergency Contact Person

If necessary, best time to call you:

May we contact you at work? Yes No

If yes, please provide the number:

Best time to call:

If you are under 18, can you furnish a work permit? Yes No

If no, please explain why:

Are you eligible for employment in this country: Yes No

Have you previously submitted an application to Cattleya before?: Yes No If yes, give date(s):

Have you previously been employed by Cattleya?: Yes No If yes, please provide dates:

Date available to work: Type of employment desired: F/T P/T Temp Seasonal

Will you relocate if the job requires it?: Yes No Will you travel if the job requires it?: Yes No

Are you able to meet the attendance requirements of the position?: Yes No

Will you work overtime if it is required?: Yes No

If no, please explain:

Have you ever been bonded?: Yes No

Have you been convicted of a crime in the last seven (7) years? Yes No If yes, please explain:

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE WILL BE CONSIDERED IN RELATION TO POSITION APPLYING FOR.

EMPLOYMENT HISTORY

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent. Explain any gaps in employment in comments section below.

Employer: Telephone #: Address:

Job Title: Name /Title of Immed. Supv:

Dates Employed: Hourly Rate:

Summary of Work Performed and Job Responsibility

Reason for Leaving:

May we contact for reference?: Yes No

Employer: Telephone #: Address:

Job Title: Name /Title of Immed. Supv:

Dates Employed: Hourly Rate:

Summary of Work Performed and Job Responsibility

Reason for Leaving:

May we contact for reference?: Yes No

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Dates Employed: Hourly Rate:

Summary of Work Performed and Job Responsibility

Reason for Leaving:

May we contact for reference?: Yes No

Skills and Qualifications: Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

EDUCATIONAL BACKGROUND

A. List the last three (3) schools attended, starting with the most recent. **B.** List number of years completed.
C. Indicated degree or diploma earned. **D.** Grade Point Average or Class Rank. **E.** Major field of study

School: Address: Number of years completed

Degree GPA Major

School: Address: Number of years completed

Degree GPA Major

School: Address: Number of years completed

Degree GPA Major

REFERENCES

List names and telephone number of three (3) business/work references who are not related to you and not previous supervisors. If not applicable, list three (3) school or personal references who are not related to you.

Name Address

Telephone Number Number of Years Known

Name Address

Telephone Number Number of Years Known

Name Address

Telephone Number Number of Years Known

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purposes of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. If I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to fill out a new application.

If I am hired. I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identify and legal work authorization.

If I am hired, I understand that I will be required to complete pre-employment drug screening as well as random drug screenings.

"I certify that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatements of facts, I am subject to disqualification, dismissal, or other action pursuant to employment agency policy and procedure, and subject to criminal penalties as prescribed by law."

ANY FALSIFICATION OF INFORMATION REGARDING PAST CONVICTIONS WILL DISQUALIFY THE APPLICANT FROM EMPLOYMENT.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant:

Date:

Please email your completed application to **cattleyawest@aol.com**