



**APPLICATION  
FOR  
EMPLOYMENT**

**700 WOLF SWAMP ROAD  
LONGMEADOW, MA 01106  
413-567-0321**

**PERSONAL INFORMATION**

(Please Type or Print)

Date of Birth: \_\_\_\_\_ Date: \_\_\_\_\_ SS# ----- \_\_\_\_\_

<b>FULL NAME</b>	<b>LAST</b>	<b>FIRST</b>	<b>MIDDLE</b>
<b>CURRENT ADDRESS</b>		<b>CITY</b>	<b>STATE</b> <b>ZIP</b>
TELEPHONE ( ) _____		REFERRED BY: _____	
CELL PHONE ( ) _____		POSITION DESIRED: _____	
EMAIL _____		SALARY REQUIREMENT: _____	
WHAT DATE WILL YOU BE AVAILABLE TO START EMPLOYMENT? _____			
ARE YOU CURRENTLY EMPLOYED? _____ CAN WE CONTACT YOUR EMPLOYER? _____			
CURRENT EMPLOYER TELEPHONE: _____ /EMAIL: _____			

**CHECK YES OR NO TO EACH OF THE FOLLOWING QUESTIONS. EXPLAIN WHEN NECESSARY.**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <b>YES</b>               | <b>NO</b>                |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>ARE YOU OVER 18 YEARS OF AGE?</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>DO YOU HAVE A VALID DRIVER'S LICENSE?</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>CAN YOU PROVIDE PROOF AFTER YOU ARE HIRED THAT YOU CAN LEGALLY WORK IN THE UNITED STATES? (IF HIRED, YOU WILL BE REQUIRED TO SUBMIT PROOF OF THE LEGAL RIGHT TO WORK IN THE UNITED STATES).</b>                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE (FELONY OR MISDEMEANOR)? A CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT—ALL FACTORS INVOLVED WILL BE CONSIDERED. IF YES, WHEN, WHERE AND DISPOSITION OF CASE: _____</b> |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>CAN YOU, WITH OR WITHOUT ACCOMMODATION, PERFORM ALL OF THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING?</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>ARE YOU A VETERAN?</b>   |

**EDUCATION AND TRAINING:**

**1. NAME AND LOCATION OF SCHOOLS (HIGH SCHOOL, COLLEGE, TRADE, BUSINESS)**

NAME	LOCATION	GRADUATE?	SUBJECTS STUDIED	DEGREE

**2. SPECIAL TRAINING: LIST ANY TRAINING YOU HAVE HAD WHICH MAY HELP TO QUALIFY YOU FOR THE POSITION FOR WHICH YOU ARE APPLYING. INCLUDE TRADE, VOCATIONAL, MILITARY, ETC. INDICATE TYPE OF TRAINING, WHERE ACQUIRED, DATES AND WHETHER YOU COMPLETED IT SUCCESSFULLY.**

**3. LICENSES/CERTIFICATIONS: LIST ANY LICENSES, CERTIFICATES OR PROFESSIONAL REGISTRATION YOU HAVE WHICH MAY HELP TO QUALIFY YOU FOR THE POSITION FOR WHICH YOU ARE APPLYING.**

TITLE	STATE	NUMBER	DATE ISSUED	DATE EXPIRES

**EMPLOYMENT HISTORY**

LIST YOUR ENTIRE WORK EXPERIENCE BEGINNING WITH YOUR PRESENT OR LAST JOB. BE SURE TO INCLUDE APPROPRIATE MILITARY EXPERIENCE. IF YOU NEED ADDITIONAL SPACE, PLEASE SUPPLY ALL REQUESTED INFORMATION ON A SEPARATE SHEET AND ATTACH TO THIS APPLICATION.

**IMPORTANT: CHECK BOX IF THE JOB GAVE YOU SPECIFIC EXPERIENCE IN THE POSITION FOR WHICH YOU ARE APPLYING.**

DATES OF WORK EMPLOYER'S NAME PHONE

FROM ADDRESS

\*/\*/\*

TO SUPERVISOR'S NAME TITLE

\*/\*/\*

FULL-TIME YOUR TITLE WAGE

PART-TIME DESCRIBE YOUR DUTIES

HRS. PER WEEK

REASON FOR LEAVING

MAY WE CONTACT THIS EMPLOYER? YES NO

**IMPORTANT: CHECK BOX IF THE JOB GAVE YOU SPECIFIC EXPERIENCE IN THE POSITION FOR WHICH YOU ARE APPLYING**

DATES OF WORK EMPLOYER'S NAME PHONE

FROM ADDRESS

\*/\*/\*

TO SUPERVISOR'S NAME TITLE

\*/\*/\*

FULL-TIME YOUR TITLE WAGE

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HRS. PER WEEK

REASON FOR LEAVING

MAY WE CONTACT THIS EMPLOYER? YES NO

**IMPORTANT: CHECK BOX IF THE JOB GAVE YOU SPECIFIC EXPERIENCE IN THE POSITION FOR WHICH YOU ARE APPLYING**

DATES OF WORK EMPLOYER'S NAME PHONE

FROM ADDRESS

\*/\*/\*

TO SUPERVISOR'S NAME TITLE

\*/\*/\*

FULL-TIME YOUR TITLE WAGE

PART-TIME DESCRIBE YOUR DUTIES

HRS. PER WEEK

REASON FOR LEAVING

MAY WE CONTACT THIS EMPLOYER? YES NO

**REFERENCES: NAME ADDRESS PHONE RELATIONSHIP**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The company may request a consumer reports or investigative consumer reports in connection with your application for employment or during the course of your employment (if any), with the company. Any information contained in such reports may be taken into consideration in evaluating your suitability for employment, promotion, reassignment or retention as an employee. Such reports, if obtained, will be prepared by a consumer reporting agency and may contain information concerning your credit standing or worthiness, character, general reputation personal characteristics, or mode of living. The types of reports that may be requested, include, but are not limited to, credit reports, criminal records checks, court records checks, and/or summaries of educational and employment records and histories. The information contained in such reports may be obtained from public record sources or through personal interviews with your neighbors, friends, associates, current or former employers, or other personal acquaintances.**

**I certify that the information contained in this application is true and correct and complete to the best of my knowledge and belief. I understand that any false statement, omission or misrepresentation of facts in connection with this application can be cause for rejection of my application, or if I am employed, for my dismissal from employment. I also understand that I am required to abide by all rules and regulations of the Employer.**

**I hereby understand and acknowledge that if I am employed, my employment relationship with the Employer is of an “at-will” nature, which means that I may resign at any time and the Employer may discharge me at any time, with or without cause. It is further understood that this “at-will” employment relationship may not be changed by any statement or conduct of any person, unless such change is specifically acknowledged in writing, signed by the General Manager.**

**I acknowledge that no other promises, agreements or representations have been made contrary to this “at-will” employment agreement, and that this agreement, as acknowledged by my signature below, is the full and complete agreement governing the Employer’s and my rights and obligations concerning termination of my employment.**

**By signing this form the applicant understands that a credit and reference check may be undertaken by Cardaropoli RE. The applicant hereby authorizes the references listed to release such information. All information thus gathered by the Employer will become and remain confidential.**

**Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_**

**Applications will be maintained in an active file for a period of 90 days and then transferred to an inactive status for a period of one year from date received.**

**We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, sexual orientation, marital or veteran status, physical or mental disabilities, or any other legally protected status.**