



[chow] Food and Beverage Co.

36 Killingworth Turnpike

Clinton, CT 06413

860-669-6200 // www.chowfoodandbeverage.com

Applicant Information:

Date of Application: _____

Last Name:	First Name:	Middle:
Street Address:		
City:	State:	Zip Code:
Phone Number:	Email Address:	
Social Security Number:	Date Available:	Desired Salary:
Position Applied For:	Full or Part Time Desired:	
Are you legally eligible to work in the United States?		
Have you ever worked for us before?		If yes, when?
Have you ever been convicted of a felony? If yes, please explain:		

Education:

High School:	Years Attended:
Did you graduate?	Degree Achieved:
College:	Years Attended:
Did you graduate?	Degree Achieved:

Employment History:

Company Name & Location:		From	To
Position:	Supervisor's Name:	Phone:	
May we contact?	Responsibilities:		
Company Name & Location:		From	To
Position:	Supervisor's Name:	Phone:	
May we contact?	Responsibilities:		
Company Name & Location:		From	To
Position:	Supervisor's Name:	Phone:	
May we contact?	Responsibilities:		
Company Name & Location:		From	To
Position:	Supervisor's Name:	Phone:	
May we contact?	Responsibilities:		

References: (Required)

Full Name:	Relationship:
Company & Location:	Phone:
Full Name:	Relationship:

Company & Location:	Phone:
Full Name:	Relationship:
Company & Location:	Phone:

Other Relevant Information:

Are you over 18 years of age?	Do you have a valid driver's license? If not, do you have reliable transportation?
Have you earned any industry-related certifications, such as ServSafe or TIPS?	

Hours of Availability:

Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:

Disclaimer & Signature:

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.

In consideration of my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment may be withdrawn at any time, with or without cause, and with or without prior notice at the option of the company or myself.

Signature:	Date:
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