

The Pantry Employment Application 1580 Post Road Fairfield, CT 06824 phone (203)259-0400 fax (203)259-0522 www.thepantry.net

Today's Date ___/___/___ Your Name _____ Address _____

Phone Number () _____ Alternate Phone Number () _____

Position you are applying for: _____ how did you hear about this job? _____

How many hours a week are you looking for? Temporary Work Part Time Full Time Anything Available _____

When are you available to begin working here? _____ Do you need to give notice at another job? _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

If you are hired can you furnish proof that you are eligible to work in the U.S.? Yes No

Are you 18 or older? Yes No If not, please state your age: _____ [some positions have minimum age requirements]

Are you related to anyone who works at The Pantry now? Yes No....if so, whom? _____

Have you ever been discharged by an employer? Yes No Please explain all terminations _____

Why would you like to work here? What do you feel you can bring to the table as an employee here? Lay out your strengths and weaknesses as a potential employee. If you have any specific skills, education or experience that could be job related, please explain.

History: Please begin with your most recent employment and include up to two additional employers prior to them. Because we will make every effort to contact previous employers, the correct phone numbers of past employers are critical to the application process.

1	If this is your current employer may we contact <input type="checkbox"/> Yes <input type="checkbox"/> No Company Name _____	
	City _____ State _____ Phone Number () _____	
	From _____ to _____ Job Title _____ Salary \$ _____	
	Supervisor's Name _____	Reason for Leaving _____
2	Company Name _____	
	City _____ State _____ Phone Number () _____	
	From _____ to _____ Job Title _____ Salary \$ _____	
	Supervisor's Name _____	Reason for Leaving _____
3	Company Name _____	
	City _____ State _____ Phone Number () _____	
	From _____ to _____ Job Title _____ Salary \$ _____	
	Supervisor's Name _____	Reason for Leaving _____

The Pantry is an equal opportunity employer. This application is intended for evaluating your qualifications for employment. This is not an employment contract. All qualified applicants will receive consideration without regard to race, color, creed, religion, national origin, sex, marital status, sexual orientation, disability, age or any characteristics protected by law. After an offer of employment and prior to reporting to work, depending on company policy and the needs of the job, you may be required to be examined by a medical professional designated by the company. This application will be active for 30 days; after that, to ensure consideration for employment, you must complete another application.

I certify that I have read and understood the application note and that my answers and statements on this application are complete and true to the best of my knowledge and belief. I understand that any omission or misrepresentation of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents to verify any of this information. I authorize all persons, schools, medical practitioners, current and/or former employers, and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, medical practitioners, current and/or former employers, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I agree that if I am employed, my employment shall be "at will," meaning that either The Pantry or I can choose to terminate the employment relationship for any reason, or no reason at all, with or without notice.

Signed _____ Dated ___/___/___ Interviewer _____