



Employment Application
Calise & Sons Bakery, Inc.
2 Quality Drive
Lincoln, RI 02865

All applicants will be considered for employment without regard to race, religion, color, sex, age, marital or veteran status, medical condition or handicap, or any other status protected by the law.

An Equal Opportunity Employer.

1. Print Name:			
	Last	First	Middle
2. Current Address:			
	Number & Street Name		Apartment Number
	City	State	Zip Code
3. Mailing Address: (If different from above)			
	Number & Street Name		Apartment Number
	City	State	Zip Code
4. Personal Phone:		Cell Phone:	
	Area Code and Number		Area Code and Number (OPTIONAL)
5. E-mail Address:			
	E-mail Address (OPTIONAL)		
6. Are you at least 18 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7. Position(s) applied for:			

Type of Employment Service Sought (check all that apply):
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> HOURS AVAILABLE _____ If a job requirement, you can work: <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Holidays <input type="checkbox"/> Nights <input type="checkbox"/> Various Shifts <input type="checkbox"/> Other _____ Date available for work/service: _____ Do you have any relatives now employed by Calise Bakery? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please list name(s) and departments: _____ _____ Have you ever been employed by us before: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, enter dates here: ___/___/___ to ___/___/___ To the best of your knowledge, are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Should you be hired, you will be required by law to provide documents verifying your employment eligibility)</i>

Education and Training (include seminars, workshop, conferences and On-the-Job training):

School/Location/Sponsor	Course of Study	Degree or Certificate		Date Obtained
High School/GED		YES	NO	
Technical/Trade/Vocational School		YES	NO	
Community College		YES	NO	
College/University		YES	NO	
College/University		YES	NO	
Other		YES	NO	

Specific Skills (in the spaces below, list the area with which you have had experience or any special skills you might have):

Computer Software	Years	Months	Other Equipment (please describe)	Years	Months

List active licenses and or certificates and expiration date(s):

List any organization(s) to which you belong which you consider relevant to your ability to perform the job:

Who referred you to our company?

Advertisement Employment Agency Friend Relative No One

Other _____

YOU MUST COMPLETE THE WORK HISTORY SECTION OF THIS APPLICATION. List your most recent employer first. **Include any unpaid work experience as well as military service.** If you held more than one position with the same employer, list each position separately. If desired, include a resume or additional pages, which will help, clarify your work experience.

13. Present Employer: _____
Business Name

Business Address: _____
City, State & Zip Code

Phone No: _____ Number You Supervised: _____

Your Job Title: _____

From: _____
Month, Day & Year

To: _____
Month, Day & Year
 Full Time Part Time

Number of hours worked per week: _____

Last Salary: _____ Per/_____

Supervisor's Name: _____ Reason for Leaving: _____

Duties in Detail: _____

May we contact employer? Yes No

14. Past Employer: _____
Business Name

Business Address: _____
City, State & Zip Code

Phone No. _____ Number You Supervised: _____

Your Job Title: _____

From: _____
Month, Day & Year

To: _____
Month, Day & Year
 Full Time Part Time

Number of hours worked per week: _____

Last Salary: _____ Per/_____

Supervisor's Name: _____ Reason for Leaving: _____

Duties in Detail: _____

May we contact employer? Yes No

15. Past Employer: _____
Business Name

Business Address: _____
City, State & Zip Code

Phone No. _____ Number You Supervised: _____

Your Job Title: _____

From: _____
Month, Day & Year

To: _____
Month, Day & Year
 Full Time Part Time

Number of hours worked per week: _____

Last Salary: _____ Per/_____

Supervisor's Name: _____ Reason for Leaving: _____

Duties in Detail: _____

May we contact employer? Yes No

READ THIS SECTION CAREFULLY BEFORE YOU SIGN THE APPLICATION BELOW

Calise & Sons Bakery staff or other designated individuals are authorized to verify any or all of the information contained herein. By my signature below, I hereby authorize the release of all information related to my application for employment service, including, but not limited to, military service, education and employment history.

A false answer to any question(s), in this application may be grounds for non-selection, or for termination after you begin work. All statements are subject to investigation, including a check of your education, training and experience statements. All information you give will be considered in reviewing your application.

I hereby certify that all statements made in this application and attached resume if included, are true. I understand that any misstatement, misrepresentation material omission or falsification of facts may cause forfeiture of all rights to employment. I understand that after a conditional offer of employment service, the following tests may be required as a condition of employment service with Calise & Sons Bakery; medical evaluation, background check, driver's license records check, criminal history check and a physical demonstration of job-related skills.

If accepted for employment service I agree to abide by and comply with all rules, regulations, policies and procedures of Calise & Sons Bakery. I understand that my employment is at-will, that I have the right to terminate my employment at any time with or without cause, and that the company has the same right. I understand that no representative of the employer has any authority to enter into any agreement with me contrary to the policies and practices of Calise & Sons Bakery.

It is Company policy that overtime, when applicable, is mandatory. You will be required to work more than eight (8) hours per day and more than forty (40) hours per week, if management deems it necessary.

This application will be considered valid for a period of 60 days. After 60 days it will be necessary to submit a new application.

Date Signed

Applicant's Signature - In Ink