



JOB APPLICATION

212 Locust St, Hartford, Connecticut 06114 /860-525-3237

Sardilli Produce & Dairy is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Applicant Information

ALL RED BOXED FIELDS ARE REQUIRED

Applicant Name:

Address:

City, State and Zip Code:

Telephone Number:

Email Address:

Date of Application:

Employment Position

Position(s) applying for:

How did you hear about this position?

What hours or shift are you available for work?

If needed, are you available to work overtime?

On what date can you start working if you are hired?

Do you have reliable transportation to and from work?

Salary desired:

Personal Information

Do you have any friends, relatives, or acquaintances working for Sardilli Produce & Dairy

Yes

No

If yes, state name & relationship:

Are you 18 years of age or older?

Yes

No

Are you a U.S. citizen or approved to work in the United States?

Yes

No

What document can you provide as proof of citizenship or legal status?

Have you ever been convicted of a criminal offense (felony or misdemeanor)?

Yes

No

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s)

applied for may, however, be considered.)

(Note: Sardilli Produce & Dairy complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Education and Training

High School

Name	Location (City, State)	Year Graduated	Degree Earned

College/University

Name	Location (City, State)	Year Graduated	Degree Earned

Military:

Are you a member of the Armed Services? _____

What branch of the military did you enlist? _____

What was your military rank when discharged? _____

How many years did you serve in the military? _____

What military skills do you possess that would be an asset for this position?

Previous Employment

Employer Name: _____

Job Title/Company: _____

Supervisor Name: _____

City, State and Zip Code: _____

Dates Employed: _____

Reason for leaving: _____

Employer Name: _____

Job Title/Company: _____

Supervisor Name: _____

City, State and Zip Code: _____

Dates Employed: _____

Reason for leaving: _____

AT-WILL EMPLOYMENT

The relationship between you and the Sardilli Produce & Dairy is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Sardilli Produce & Dairy. No representative of Sardilli Produce & Dairy has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.

After electronically signing the document it will be emailed to JOBAPP@sardilliproduce.com

You can also print out the document and email it to JOBAPP@sardilliproduce.com

Applicant Signature: _____

DATE: