

CONNECTICUT INSTITUTE FOR COMMUNITIES, INC.

120 Main Street, 4th Floor, Danbury, CT 06810

Tel: 203-743-9760 ~ Fax: 203-743-3411

Date: _____

APPLICATION FOR EMPLOYMENT

CIFC is an Equal Opportunity/Affirmative Action employer. Programs, services, and employment are available to everyone equally. Please inform the Human Resources Office if you require accommodations for the application or interview.

APPLICANT INFORMATION			
Last Name	First Name	Middle Name	
Address	City	State	Zip
Home Phone	Cell	Social Security Number - - - - -	
Email Address	Driver's License #	State:	Are you over 18 years of age: <input type="checkbox"/> Yes <input type="checkbox"/> No
EMPLOYMENT INFORMATION			
Position Applied For:		Salary Requirement:	
<p>Are you employed at the present time? _____ If yes, please complete below</p> <p>Employer's Name: _____</p> <p>Employer's Address: _____</p> <p>_____</p> <p>1. How long have you been with this employer? _____</p> <p>2. Date available to start: _____</p> <p>3. If you are under 18 and we require a work permit, can you furnish one? _____</p> <p>If no, please explain: _____</p> <p>4. Have you ever worked for CIFC before? _____</p> <p>If yes, when, and what position: _____</p> <p>5. Are you a U.S. citizen <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, are you legally allowed to work in the U.S? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>6. Type of employment desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal</p>			

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EDUCATION		
High School	Address	
# of Years Completed: _____ Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
GPA: _____ Class Rank: <input type="checkbox"/> Top Quarter <input type="checkbox"/> 2 nd Quarter <input type="checkbox"/> 3 rd Quarter <input type="checkbox"/> 4 th Quarter		
College/University	Address	
# of Years Completed: _____ Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
GPA: _____ Degree: _____ Major: _____		
Other	Address	
# of Years Completed: _____ Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
GPA: _____ Degree: _____ Major: _____		
PROFESSIONAL REFERENCES		
<i>Furnish the names, addresses, and telephone numbers of two supervisors and/or managers of whom you are or have been employed:</i>		
Name: _____ Phone _____		
Address: _____ City: _____ State: _____ Zip: _____		
Name: _____ Phone _____		
Address: _____ City: _____ State: _____ Zip: _____		
EMPLOYMENT EXPERIENCE (list most recent first) (continue on rear of sheet if needed)		
Name & Address	Position(s) Held	Dates (Start-End)

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I release employers, schools, organizations, and individual persons from all liability when responding to inquiries in connection with my application. In the event I am employed by CIFIC, I understand that false, substantially incomplete or misleading information given in my application, other documentation submitted in connection with any application, or interview(s) may result in discharge or other disciplinary action.

Signature of Applicant

Date