



Mill on the River

RESTAURANT

Application For Employment

989 Ellington Road, South Windsor, CT 06074

(860)289-7929

www.themillontheriver.com

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

Position(s) Applied For:	Date of Application:
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How did you learn about us?
☐ Advertisement ☐ Friend ☐ Walk-In

Last Name	First Name	Middle Initial
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Address	Number	Street	City	State	Postal Code
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Phone Number(s)			
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Email Address:

If you are under 18 years of age, can you provide proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? ☐ Yes ☐ No

Are you currently employed? ☐ Yes ☐ No

If yes, give date: _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? ☐ Yes ☐ No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available to begin work? _____

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Current Availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
a.m.							
p.m.							

Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain: _____

Will you subject to mandatory drug testing both prior to and during employment? ☐ Yes ☐ No

Do you have your own means of transportation? ☐ Yes ☐ No

Employment Experience:

Begin with your present or most recent job. Include any job-related military assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap, or other protected status. If you need additional space, please continue on a separate sheet of paper.

Employer:	Dates Employed		Work Performed:
	To	From	
Address:			
	Hourly Rate/Salary		
	Starting	Final	
Telephone Number:			
	Job Title:		
Reason For Leaving:			

Employer:	Dates Employed		Work Performed:
	To	From	
Address:			
	Hourly Rate/Salary		
	Starting	Final	
Telephone Number:			
	Job Title:		
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Address:			
	Hourly Rate/Salary		
	Starting	Final	
Telephone Number:			
	Job Title:		
Reason For Leaving:			

Education:

Highest Degree or Education: _____ Date Received: _____
Institution Issued From: _____

Personal Information:

Please tell us something about yourself; hobbies, talents, and special skills or qualifications that you think pertinent.
