

# Application for Employment

## C&C Candies & Country Store

PO Box 193, 1305 Long Run Road, Friedensburg, PA 17933  
 570.739.2963 - *An Equal Opportunity Employer*

**Applicants must be 18 years of age or older because Pennsylvania laws state that you must be 18 years of age to operate a meat slicer.**

Name: \_\_\_\_\_  
Last                      First                      Middle Initial

Present Address: \_\_\_\_\_  
Number                      Street                      City                      State                      Zip Code

How long have you lived at the current address? \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Male or Female (please circle)

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction?    Yes No

Are you over the age of 18? Yes or No - If you answered no, when will you be turning 18? \_\_\_\_\_

Have you ever been convicted of a crime? If yes, explain number of convictions, nature of offense, leading to convictions, how recently such offenses were committed, sentence imposed and types of rehabilitation.  
 \_\_\_\_\_  
 \_\_\_\_\_

Do you have a reliable means of transportation to and from work? \_\_\_\_\_

Are you involved in any extra-curricular activities which might prohibit you from attending work?  
 If yes, explain: \_\_\_\_\_  
 \_\_\_\_\_

Position(s) applied for and salary desired	Days/Hours available to work
<input type="checkbox"/> Cashier      _____/hour	No Preference _____ Thursday _____
<input type="checkbox"/> Pastry Chef      _____/hour	Monday _____ Friday _____
<input type="checkbox"/> Bakery Assistant to Pastry Chef      _____/hr	Tuesday _____ Saturday _____
<input type="checkbox"/> Chocolatier      _____/hour	Wed. _____ Sunday _____
How many hours can you work weekly? _____	
Employment desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Full or Part Time	
Length of Employment Anticipated _____	
Do you object to working weekends or holidays?    Yes    No    If yes. Please explain _____	
Do you have experience working a lottery machine?    Yes    No	
Do you have any experience working with registers? Yes    No    If yes, list experience _____	
_____	

**Education**

<b>Type of School</b>	<b>Name of School</b>	<b>Location</b>	<b>Number of Years Completed</b>	<b>Major and Degree</b>
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High School

Business/Trade

College – Undergraduate

College – Graduate

Are you currently enrolled in classes now?   YES   NO

Please list two references other than relatives:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

List all previous work experience, starting with the most recent (include any military service):

1. Employer/Contact Person: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_  
Why are you no longer there? \_\_\_\_\_  
Your last job title: \_\_\_\_\_  
Pay or Salary: Start: \$ \_\_\_\_\_ /hour      Final: \$ \_\_\_\_\_ /hour  
Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
List the jobs you held, duties preformed, skills used or learned, advancements or promotions while you worked at this company:

2. Employer/Contact Person: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_  
Why are you no longer there? \_\_\_\_\_  
Your last job title: \_\_\_\_\_  
Pay or Salary: Start: \$ \_\_\_\_\_ /hour      Final: \$ \_\_\_\_\_ /hour  
Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
List the jobs you held, duties preformed, skills used or learned, advancements or promotions while you worked at this company:

3. Employer/Contact Person: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_  
Why are you no longer there? \_\_\_\_\_  
Your last job title: \_\_\_\_\_  
Pay or Salary: Start: \$ \_\_\_\_\_ /hour      Final: \$ \_\_\_\_\_ /hour  
Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
List the jobs you held, duties preformed, skills used or learned, advancements or promotions while you worked at this company:

Are you currently employed?    \_\_\_Yes    \_\_\_No  
May we contact your present employer?    \_\_\_Yes    \_\_\_No  
Did you complete this application yourself?    \_\_\_Yes    \_\_\_No

Applications that are incomplete will be automatically disqualified for employment

*Duties included in this job include:* operating the lottery machine, operating the meat slicer, checking out customers using a computer system, the manufacturing and selling of chocolates, stocking the shelves, vacuuming and mopping the store floors at the end of the day, cleaning including windows, countertops and shelves, etc. Must be able to lift 50 pounds or more.

**ACKNOWLEDGMENT AND AUTHORIZATION**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*We are committed to providing opportunities for all persons without regard to sex, race, creed, religion, ethnic background or handicap in its programs, policies, or employment practices.*