



APPLICATION FOR EMPLOYMENT

 Date ____/____/____

The Day is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, national origin, disability or sexual orientation. This equal employment opportunity policy extends to all aspects of the employment relationship, including compensation, benefits, promotions, training, job assignment and discipline.

PERSONAL INFORMATION

Name (Last, First, Middle) _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____

If you are under age 18, will you be able to furnish a work permit after employment? Yes ____ No ____ Not Applicable ____

Are you legally eligible to work in the U.S.? (Verification will be required upon hire) Yes ____ No ____

EMPLOYMENT DESIRED

Position/Department _____ Date You Can Start _____ Salary Desired _____

Are you employed now? Yes ____ No ____ Shift Desired _____

Have you worked at The Day before? Yes ____ No ____ When? _____

Referred by: _____

EDUCATION

Education	Name/Location	Circle Last Year Completed	Did You Graduate?	Degree/Course of Study
High School/GED		9 10 11 12	Yes__No__	
College		1 2 3 4	Yes__No__	
College		1 2 3 4	Yes__No__	
Business/Trade/Other (Specify)		1 2 3 4	Yes__No__	

Are You Currently Taking Classes? Yes ____ No ____

If Yes, Explain: _____

Other Details of Experience or Training Including Information on Adult Education Programs: _____

EMPLOYMENT HISTORY • THIS SECTION MUST BE COMPLETED EVEN IF YOU HAVE A RESUME.

Please list all employment in **the past 10 years starting with present** or most recent employer. Account for all periods including unemployment and service with the Armed Forces.

Company _____
Street Address _____ City _____ State _____ Zip _____
Supervisor's Name _____ Phone _____
Dates of Employment: Start _____ Ending _____
Salary History: Start _____ Ending _____
Position & Duties: _____
Reason for Leaving: _____

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Street Address _____ City _____ State _____ Zip _____
Supervisor's Name _____ Phone _____
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Street Address _____ City _____ State _____ Zip _____
Supervisor's Name _____ Phone _____
Dates of Employment: Start _____ Ending _____
Salary History: Start _____ Ending _____
Position & Duties: _____
Reason for Leaving: _____

Indicate any employers you do not want us to contact _____
If your employment records exist under a different name, please specify _____

PLEASE READ EACH PARAGRAPH BELOW AND SIGN ON THE LINE BELOW THE PARAGRAPH

I understand that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient for refusal to hire, or dismissal if I have been employed, no matter when discovered by The Day Publishing Company.

Signature: _____

I understand that any employment is conditioned on a background check. I authorize The Day Publishing Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to The Day Publishing Company without giving me prior notice of such disclosure. In addition, I release The Day Publishing Company, any former employers and all such references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

Signature: _____

APPLICANTS FOR POSITIONS REQUIRING THE USE OF A COMPANY OWNED/LEASED VEHICLE PLEASE COMPLETE THE FOLLOWING

Drivers License	State	License Number	Expiration	Type/Class

Have you ever been denied a license, permit or privilege to operate a motor vehicle? **Yes**____ **No**____

Has any license, permit or privilege been suspended or revoked? **Yes**____ **No**____

ACCIDENT RECORD FOR THE PAST 5 YEARS (ATTACH ADDITIONAL SHEET IF NECESSARY)

Date	Nature of Accident	Injuries

TRAFFIC CONVICTIONS & FORFEITURES FOR THE PAST 5 YEARS

Date	Location	Charge	Penalties

If you are hired or transferred into a position that requires the operation of a vehicle, we will require a DMV investigation.

Do you authorize investigation of your DMV records?

Yes____ **No**____

Signature: _____

PROFESSIONAL REFERENCES

Give names of three professionals, not related to you, whom you have known for at least one year. Do not include personal references.

Name: _____

Occupation: _____

Company Name: _____

Street Address _____ City _____ State _____ Zip _____

Phone: _____

Name: _____

Occupation: _____

Company Name: _____

Street Address _____ City _____ State _____ Zip _____

Phone: _____

Name: _____

Occupation: _____

Company Name: _____

Street Address _____ City _____ State _____ Zip _____

Phone: _____

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Note: In the absence of a written agreement to the contrary, your employment with The Day Publishing Company is "at will." You may terminate your employment for any reason at any time with or without written notification. The Day Publishing Company retains the right to terminate your employment.

Signature: _____ Date _____

The Fair Credit Reporting Act requires employers to get written consent from prospective or current employees prior to obtaining from a third party, information on the employee's credit as well as the employee's criminal history or motor vehicle record, including any convictions for driving while intoxicated.

Under the Act, an employer must first receive written consent from the employee or prospective employee to acquire information about the individual's credit, driving record or criminal history. A copy of any information received must be provided to the employee. If information is discovered during the review that might prohibit the applicant from being employed or might result in termination of an existing employee, the employer must send out another notice so informing the employee and provide a summary of the individual's rights under the Fair Credit Reporting Act.

If the individual is terminated or not hired as a result of the information discovered, he or she must be provided the name and address of the agency that furnished the information and alerted to his or her right to dispute the information with the providing agency. The Act only applies when third party companies are used to acquire the information. If the employer performs the background check on its own, the Act does not apply.



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47 Eugene O'Neill Drive, New London, CT 06320

