



Quality • Integrity • Experience

Coty Construction LLC  
DBA Coty Pool Co.  
412 Norwich Ave  
Lebanon, CT 06249  
Office Phone (860) 884-3271  
email: office@cotypoolco.com

### APPLICATION FOR EMPLOYMENT

*We are an Equal Opportunity Employer. All applicants are considered without regard to race, color, religion, disability, sex, national origin, age (for those age 40 or over), or any other basis protected by federal state, or local law. This employment application is only active for 30 days. After this time period a separate employment application must be submitted in order to be considered for employment.*

Please fill out completely

#### Personal Information

Last Name _____ First _____ Middle _____		
Street Address _____		Social Security No. _____
City/State/Zip _____		
Home number _____		Day Phone _____
Fax# _____		E-mail address _____

#### Employment Information

Position for which you are applying? (entry level tech, experienced tech, expert tech) refer to attachment _____
Type of employment you are seeking: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
(Please answer the following questions if yes)
Employer Name _____
Employer Address _____
How long have you been with this employer? _____ Present salary? _____
If offered a position, when can you start? _____
If hired, can you show legal proof of your rights to work in the U.S.? _____
Have you ever been dismissed, fired or asked to resign from any position? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain _____
_____

Have you ever been convicted of a felony or misdemeanor? (A yes answer will not necessarily disqualify you, misleading information will.)  Yes  No

If yes, please explain \_\_\_\_\_

Do you have reliable transportation?  Yes  No. What is it? \_\_\_\_\_

Please list any days, times or dates that you would not be able to work. \_\_\_\_\_

Are you willing to work: Overtime?  Weekends?  Holidays?

Desired starting salary? \_\_\_\_\_

How many days have you missed from work or school within the past year other than approved vacation, disability, sick? \_\_\_\_\_

How many late days? \_\_\_\_\_

Refer to the job description. Do you have the ability to complete these tasks?

Yes  No

### Education

Circle last grade completed    1 2 3 4 5 6 7 8 9 10 11 12    G.E.D.    College

Name of High school? \_\_\_\_\_ Location? \_\_\_\_\_

Name of College? \_\_\_\_\_ Location? \_\_\_\_\_ Major? \_\_\_\_\_

Additional Education? \_\_\_\_\_

### Work History

Please list your last 4 employers starting with the most recent.

1. Company \_\_\_\_\_ Phone # \_\_\_\_\_

Street address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Dates employed from \_\_\_\_\_ to \_\_\_\_\_

Salary: beginning \_\_\_\_\_ ending \_\_\_\_\_

Job title \_\_\_\_\_ Supervisors Name and Title \_\_\_\_\_

Description of duties? \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

2. Company \_\_\_\_\_ Phone # \_\_\_\_\_

Street address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Dates employed from \_\_\_\_\_ to \_\_\_\_\_

Salary: beginning \_\_\_\_\_ ending \_\_\_\_\_

Job title \_\_\_\_\_ Supervisors Name and Title \_\_\_\_\_

	Description of duties? _____ _____
	Reason for leaving? _____
3.	Company _____ Phone # _____
	Street address _____ City,State,Zip _____
	Dates employed from _____ to _____
	Salary: beginning _____ ending _____
	Job title _____ Supervisors Name and Title _____
	Description of duties? _____ _____
	Reason for leaving? _____
4.	Company _____ Phone # _____
	Street address _____ City,State,Zip _____
	Dates employed from _____ to _____
	Salary: beginning _____ ending _____
	Job title _____ Supervisors Name and Title _____
	Description of duties? _____ _____
	Reason for leaving? _____

**PLEASE READ THE FOLLWING CAREFULLY, THEN SIGN AND DATE THE APPLICATION.**

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge. Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer. I authorize this company,if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time. I will be notified as to the nature and scope of such investigations. I hereby agree to submit to any drug/alcohol test required of me, whether prior to my employment or if employed by this company at any time thereafter. I understand and expressly agree that if employed by the company, storage areas provided for me (locker, desk, etc.) are open to investigation or search by the company without prior notice to me. I further understand this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is for an indefinite period of time and the company may change wages, benefits, and conditions at any time. My employment is at will. No individual with the company is authorized to change the employment-at-will status except an officer of the company, who may do so only in writing. I have read and understand the above.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_