



Columbia Manufacturing, Inc. | 165 Route 66 East | PO Box 368 | Columbia, CT 06237-0368  
Office: 860.228.2259 | Fax: 860.228.2273 | [www.columbiamanufacturing.net](http://www.columbiamanufacturing.net)

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary (if salaried) or Hourly Wage if Hourly \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Full Time or Part? FT ☐ PT ☐ Special Skills: \_\_\_\_\_

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐

College: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree: \_\_\_\_\_



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## References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐



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Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

#### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

#### Disclaimer and Signature

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

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal. I hereby authorize you to investigate all statements in this application as necessary.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Consent to Drug Test and Release

*I **understand** that Columbia' Manufacturing 's Drug Free Workplace Policy requires job applicants and employees to submit to drug testing in a variety of circumstances. I understand this testing will be done by means of a urine sample, and that if I test positive for any illegal drug I will be subject to disciplinary action (including immediate discharge), or I will not be hired to work for the Company.*

*I **consent** to drug testing as a pre (and post) condition of employment and I authorize the disclosure of the results to the Company. In addition, I will provide whatever assistance I can in interpreting the results, and in particular I will disclose all drugs or medications (whether legal or illegal) which I have used in the 60 days preceding the test.*

*I **release** the Company, the testing firm, and all of their respective officers, directors, and employees from any and all claims or liability based on or arising out of these tests, including but not limited to the testing procedures, the providing of samples, the analysis, the disclosure of the test results, and any actions taken by the Company or the testing firm at any time in reliance of the test results.*

**THIS CONSENT AND RELEASE IS GIVEN VOLUNTARILY IN EXCHANGE FOR THE COMPANY'S CONTINUATION OF MY EMPLOYMENT, OR CONSIDERATION OF MY APPLICATION.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_