



P.O. Box 13078
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Employment Application

Personal Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date of Birth: _____ SSN: _____

Referred by: _____

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

Have you worked for CVINE in the past? YES NO If yes, when? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Emergency Contact

Please list two emergency contact numbers:

Full Name:		Relationship:	
Phone:			
Full Name:		Relationship:	
Phone:			

Job/Computer Skills

Available # of Hours per week: _____

Please check type of skills you possess:

Word, Excel, PowerPoint YES NO

Basic typing skills YES NO

Customer service skills YES NO

Other skills YES NO If so, please list below and/or attach your resume

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that I may be asked to complete a background check.

Employee
Signature: _____

Date: _____

Employer
Signature: _____

Date: _____