



Application for Employment

Applications are received and employees are hired without regard to race, creed, color, sex, age, national origin, marital status, disability, veteran's status and citizenship status.

PERSONAL INFORMATION

Name: _____
Last First Middle

Present Address: _____ Apt. Number: _____

City: _____ State: _____ Zip: _____

Phone: _____

Are you over 18 years of age? _____ (If no, employment is subject to verification that you are of minimum legal age.)

Are you a citizen of the United States? _____

If not a citizen of the U.S., can you provide proof that you can legally be employed in the U.S.? _____

What languages can you read, speak and write fluently? _____

EMPLOYMENT INFORMATION

Position applying for: _____ Date available for work: _____

Type of employment: (Circle One): Full Time Part Time Temporary

What days and hours if part time? Days: _____ Hours: _____

Have you ever applied for a job at GF before? _____ When? _____

Have you ever worked at GF before? _____ When? _____

Have you ever been convicted of any crime other than a minor traffic violation? _____

If yes, state date, court and place where offense occurred:

EDUCATION INFORMATION

| Schooling | Years Completed | Degree Received/ Major Subject | Name of School | Location | Did you Graduate? |
|-----------------------------------|-----------------|-----------------------------------|----------------|----------|-------------------|
| Grammar or High School | | | | | |
| Trade, Business or Correspondence | | | | | |
| College | | | | | |
| Graduate School or Seminary | | | | | |
| Other: | | | | | |

Describe any other specialized or professional training (such as computers, etc.). If you are presently in school, what are you studying? _____

PRIOR WORK RECORD - MAY ATTACH RESUME IF AVAILABLE

Name of present or most recent Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Name & Position of Immediate Supervisor: _____

Phone: _____ Date of Employment: From: _____ To: _____

Your Position, Title & Duties:

Salary: Starting rate: _____ Ending rate: _____

Reason for Leaving: _____

May we contact your Supervisor? _____

Name of Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Name & Position of Immediate Supervisor: _____

Phone: _____ Date of Employment: From: _____ To: _____

Your Position, Title & Duties:

Salary: Starting rate: _____ Ending rate: _____

Reason for Leaving: _____

May we contact your Supervisor? _____

Name of Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Name & Position of Immediate Supervisor: _____

Phone: _____ Date of Employment: From: _____ To: _____

Your Position, Title & Duties:

Salary: Starting rate: _____ Ending rate: _____

Reason for leaving: _____

May we contact your Supervisor? _____

MILITARY SERVICE RECORD

Were you in U.S. Armed Forces? _____ If yes, what Branch? _____

Dates of duty: From: _____ To: _____ Rank at discharge: _____

List duties in the Service including special training: _____

REFERENCES. Do not list relatives or previous supervisors.

Name: _____ Occupation: _____

Years known: _____ Phone number: _____

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The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on my application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation on my personal history, criminal background and credit record through any investigative agencies or bureaus of your choice.

I understand that employment at this organization is “at will”, and includes no guarantee, contract or promise of employment for any specified length of time.

I authorize the use of any information in this application and any attached supplements to verify my statements, and I authorize the past employers, doctors, all references, and any other persons to answer all questions asked concerning my ability, character, reputation and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.

Signature of Applicant _____ Date _____