



Application For Employment

Equal access to programs, services and employment is available to all persons. Those applications requiring a reasonable to the accommodation to the application and/or interview process should notify a representative of the Human Resources Department. We are an equal opportunity employer.

Position Applied For

Application Date

Full Name

Address

City

State

Zip Code

Home Phone

Cell Phone

Shift Preferred

1 2 3 Any

E-mail

Expected Pay

Would you accept full-time work?

Yes No

Would you accept part-time work?

Yes No

On what date would you be available to work?

If necessary, best time to call you

A
M
P
M

Home
Cellular/Other

How were you referred to our company?

Have you submitted an application here before?

Yes No

If yes, please give dates and position(s):

Have you ever been employed here?

Yes No

If yes, please give dates:

Is this request for reemployment following an extended military leave of absence from our Company?

Yes No

*If yes, additional information may be requested.

If you are under 18 years old, can you provide a work permit if required?

Yes No N/A

Are you legally eligible for employment in the United States? (If yes, proof is required if hired.)

Yes No

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

Yes

No

Need more information about the jobs "essential functions" to respond

NOTE: This question is not designed to elicit information about an applications disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage, to the extent permitted by law.

Will you travel if required?

Yes No

Will you work overtime if required?

Yes No

If they explained to you, are you able to meet the attendance requirements of the position?

Yes No N/A

Have you ever been bonded?

Yes

No

Please provide your drivers license number, if required for this job

State

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict you to work for our Company?

Yes No

If yes, please explain:

NOTE: Answering "yes" to the following question does not constitute an automatic bar from employment. Factors such as date of offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken in to account.

Have you ever pleaded "guilty" or "no contest" to, or have been convicted of a crime?

Yes No

If yes, please provide dates and details(s):

Employment Experience

Employer

DO NOT contact this employer

Contact Name

E-mail

Address

Phone Number

Job Title

Supervisor

Date Employed

Are you still currently Employed?

Starting Hourly Rate/Salary

Ending Hourly Rate/Salary

Work Performed

Reason For Leaving

What did you like most about your position?

What were the things you liked least about your position?

Employer

DO NOT contact this employer

Contact Name

E-mail

Address

Phone Number

Job Title

Supervisor

Date Employed

Date of Termination

Starting Hourly Rate/Salary

Ending Hourly Rate/Salary

Work Performed

Reason For Leaving

What did you like most about your position?

What were the things you liked least about your position?

Employer

DO NOT contact this employer

Contact Name

E-mail

Address

Phone Number

Job Title

Supervisor

Date Employed

Date of Termination

Starting Hourly Rate/Salary

Ending Hourly Rate/Salary

Work Performed

Reason For Leaving

What did you like most about your position?

What were the things you liked least about your position?

Employment Experience

Explain any gaps in your employment, other than those due to personal illness, injury or disability

Have you ever been fired or asked to resign from a job?

If yes, please explain:

Yes

No

Education Background

High School

Location

Course of Study

Did you graduate?

Degree or diploma?

Yes

No

College

Location

Course of Study

Did you graduate?

Degree or diploma?

Yes

No

Graduate School

Location

Course of Study

Did you graduate?

Degree or diploma?

Yes

No

Vocational Training/Other

Location

Course of Study

Did you graduate?

Degree or diploma?

Yes

No

Continuing Training

Special Training or Skills

Languages, machine operation, etc., that would be of benefit in the job for which you are applying

References

Name	Title	Phone	E-mail	Years Known
Name	Title	Phone	E-mail	Years Known
Name	Title	Phone	E-mail	Years Known

Applicant Statement

I certify that all the information by me on this application is true and complete, and I understand that if any false or misleading information, omissions or representations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the Company's rules and regulations, and I understand that these rules and/or employee handbook do not form a contract of employment either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Company's option.

I also understand and agree that the terms of my employment may be changed, with or without cause and with or without notice, at any time by the Company. I understand that no Company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigration law s.

This Company does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under federal, state or local law. No question on this application is used to limit or exclude an applicant from employment consideration on any basis prohibited by applicable federal, state or local law.

Goserco requires that you certify your application by submitting an electronic signature. To certify your application, read the text below and provide an electronic signature (type your name). I certify that all information in my application is accurate and true.

Applicant's Signature

Date