

Employment Application

An Equal Employment Opportunity (EEO) Employer

Please Print

Date: _____

Last Name First Name Middle Initial
(____)____ - (____)____ -

Email Home Phone Cell Phone

Present Address No. Street City State Zip

Permanent Address No. Street City State Zip
(If different from present address)

Employment Desired

Position applying for: _____

Are you seeking:

Full-Time? Yes No

Part-Time? Yes No

Are you available for work on weekends?.....Yes No

Would you be available to work overtime if necessary?.....Yes No

If hired, on what date can you start work? _____

Salary Desired: _____

Personal Information

Have you ever applied to Goodwill Industries before?..... Yes No

If yes, when? _____

Have you ever worked for Goodwill Industries before?Yes No

If yes, when? _____

Were you referred by an agency, if so what agency? _____

Do you have any friends or relatives working for Goodwill Industries?.....Yes No

If yes, state name(s) and relationship:

Name

Relationship

Name

Relationship

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?.....Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, skill and agility tests.)

Education, Training and Experience

School	Name and Address	No. of Years Completed	Did you Graduate?	Degree or Diploma
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/ University			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vocational/ Business			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Many of our customers (clients) do not speak English. Do you speak, write or understand any foreign languages?.....Yes No

If yes, which language(s)? _____

Do you have any other experience, training, qualifications or skills, which you feel make you especially suited for work at Goodwill Industries?.....Yes No

If so, please explain:

Answer the following questions if you are applying for a professional position:

Are you licensed/certified for the job applied for?.....Yes No

Name of license/certification: _____ Issuing State: _____

Name of license/certification: _____ Issuing State: _____

Has your license/certification ever been revoked or suspended?.....Yes No

If yes, state reason(s), date of revocation or suspension and date of reinstatement.

Employment History

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

_____					(____)____-____
Name of Current of Last Employer					Telephone No.
_____			_____		
Type of Business			Your Supervisor's Name		
Address: No.	Street	City	State	Zip	
Your Job Title: _____					
Your Duties:					

Date of Employment _____ - _____					
From		To			
Reason for Leaving: _____					
If presently employed, may we contact this employer for a reference?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					

Goodwill conducts post-offer criminal background investigations in accordance with federal and state law.

Goodwill conducts post-offer, safety-sensitive employment drug testing in accordance with federal and state law.

Employment History (Continued)

 Name of Current of Last Employer (_____)_____-_____
 Telephone No.

 Type of Business Your Supervisor's Name

Address: No. Street City State Zip

Your Job Title: _____

Your Duties:

Date of Employment _____ - _____
 From To

Reason for Leaving: _____

If presently employed, may we contact this employer for a reference?.....Yes No

 Name of Current of Last Employer (_____)_____-_____
 Telephone No.

 Type of Business Your Supervisor's Name

Address: No. Street City State Zip

Your Job Title: _____

Your Duties:

Date of Employment _____ - _____
 From To

Reason for Leaving: _____

If presently employed, may we contact this employer for a reference?.....Yes No

Note: Attach additional page(s) if necessary.

Military Service

Have you obtained any special skills or abilities as the result of military service?

Yes No

If so, describe:

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: _____					
Address: _____					
No.	Street	City	State	Zip	
Occupation _____			Business _____		
Telephone No. (____) _____ - _____			Number of years acquainted _____		

Name: _____					
Address: _____					
No.	Street	City	State	Zip	
Occupation _____			Business _____		
Telephone No. (____) _____ - _____			Number of years acquainted _____		

Name: _____					
Address: _____					
No.	Street	City	State	Zip	
Occupation _____			Business _____		
Telephone No. (____) _____ - _____			Number of years acquainted _____		

Please Read Carefully, then Initial Each Paragraph and Sign Below

Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations for any and all claims, demands or liabilities arising out of or any way related to such investigation or disclosure.

Initials I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Initials A post-offer search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) will be conducted by internal personnel employed by Goodwill Industries, I am entitled to copies of any such public records obtained by them unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

Initials NOTICE: Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States. Goodwill Industries of South Central California participates in the E-Verify system and will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employees Form I-9 to confirm work authorization upon presentation of a verifiable warrant or subpoena in accordance with federal and state law. Please see the E-Verify information available on Corporate Headquarter premises for questions concerning the e-verify process.

I waive receipt of a copy of any public record described in the paragraph above.

Date: _____

Applicant's Signature: _____