

APPLICATION FOR EMPLOYMENT

(Answer all questions – Please Print)

Please email this form to
apply@gresserco.com

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.

Date of Application: _____

Position(s) Applied For: _____

Referral Source: Advertisement Friend Relative Employment Agency

Other _____

Name: _____
Last First Middle

Address: _____
Street City State Zip

Home Phone Number: _____ Alternative Phone Number: _____

Social Security Number: _____ - _____ - _____ Date of Birth (Optional): _____

Are you a Citizen of the United States? Yes No

If not, do you possess an Alien Registration Card? Yes No

Are you available to work? Full Time Part Time

Do any of your Friends or Relative work here? Yes No

If yes, list Name(s): _____

Are you? Under 18 Over 18 years of age

Have you ever been convicted of a felony or a theft related offense? Yes No

If yes, describe in full, including date(s): _____

Do you possess a valid Driver's License? Yes No

If yes, State: _____ Driver's License Number: _____

Are you on Lay-Off and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Have you ever been bonded? Yes No

If yes, for what position (s)? _____

Are you a Veteran? Yes No

If yes, what was your branch of military service? _____

Military Rank: _____

List trade or professional organizations of which you are a member, including offices held: _____

Give name, address, and phone number of three references not related to you:

Name _____	Name _____	Name _____
Address _____	Address _____	Address _____
Home Phone _____	Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____	Work Phone _____

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job. Include military service assignments and volunteer activities.

Employer:	From	To	Work Performed
Address:			
Job Title:			
Supervisor:			
Rate or Salary- Starting	Ending		
Reason for Leaving:			

Employer:	From	To	Work Performed
Address:			
Job Title:			
Supervisor:			
Rate or Salary- Starting	Ending		
Reason for Leaving:			

Employer:	From	To	Work Performed
Address:			
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Rate or Salary- Starting	Ending		
Reason for Leaving:			

Employer:	From	To	Work Performed
Address:			

Job Title:	
Supervisor:	
Rate or Salary- Starting	Ending
Reason for Leaving:	

If you need additional space, please continue on a separate sheet of paper.

Summarize special skills and qualifications that you have: _____

EDUCATION

	Elementary	High	College/ University	Graduate/ Professional
School Name				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4

Describe specialized training, apprenticeship, skills, and extra-curricular activities: _____

AGREEMENT

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

I understand that a complete criminal and civil check may be conducted.

I authorize you to make such investigations and inquiries of driving record, my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false and misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

Signature of Applicant

Date

NOTE: Check this box if you would like to receive copies of information obtained in any investigation.