



APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Please print clearly in ink.

If you need assistance in completing this application, please let us know so that we can discuss a reasonable accommodation.

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # () Mobile/Beeper/Other Phone # () Email Address _____

Position(s) applied for _____ Date of Application ____/____/____

Referral Source (Please check the appropriate category and name the source)

- Walk-In School
Employee Job Fair
Advertisement Staffing Agency
Company's Website Government Employment Agency
Other Internet Other

Have you submitted an application here before?..... Yes No

Are you legally eligible for employment in this country?..... Yes No

If yes, give dates from ____/____/____
To ____/____/____

Date available for work. ____/____/____

Will you travel if job requires it?..... Yes No

Will you relocate if job requires it? Yes No

What is your desired salary range or hourly rate of pay?
\$ _____ Per _____

- Type of employment desired:
Full-Time Part-Time
Educational Co-Op
Per Diem Temporary

Will you work overtime if required?..... Yes No
If no, please explain _____

Driver's license number if driving may be required in some positions for which your are applying
_____ State _____

If necessary, best time to call you at home is _____ AM
_____ PM

Have you ever been bonded?..... Yes No

EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information. You may include military service and any verifiable volunteer work.

Employer _____ Telephone # _____ () _____ Street Address _____ Starting job title/final job title _____ Immediate supervisor and title (for most recent position held) _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later Why did you leave? _____ Summarize the type of work performed and job responsibilities _____ _____	Dates employed: _____ Month / Year To Month / Year Starting Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Ending Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____
Employer _____ Telephone # _____ () _____ Street Address _____ Starting job title/final job title _____ Immediate supervisor and title (for most recent position held) _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later Why did you leave? _____ Summarize the type of work performed and job responsibilities _____ _____	Dates employed: _____ Month / Year To Month / Year Starting Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Ending Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____
Employer _____ Telephone # _____ () _____ Street Address _____ Starting job title/final job title _____ Immediate supervisor and title (for most recent position held) _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later Why did you leave? _____ Summarize the type of work performed and job responsibilities _____ _____	Dates employed: _____ Month / Year To Month / Year Starting Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Ending Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____
Employer _____ Telephone # _____ () _____ Street Address _____ Starting job title/final job title _____ Immediate supervisor and title (for most recent position held) _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later Why did you leave? _____ Summarize the type of work performed and job responsibilities _____ _____	Dates employed: _____ Month / Year To Month / Year Starting Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Ending Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____

SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

REFERENCES

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors.

If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to you	Telephone Number	Number of Years Known
			()	
			()	
			()	

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with GLSS is true, complete and correct.

I expressly authorize, without reservation, GLSS, its representatives, employees or agents to conduct a background check and 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 release any individual, agent, and GLSS and its agents, servants, and employees, directors, officers and representatives from all claims and liabilities whatever that may arise from disclosure of such information.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period of definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

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 and that federal immigration laws required me to complete an I-9 Form in this regard.

I also understand that for certain positions I may be subject to a CORI check and may be required to undergo drug testing.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____ / _____ / _____