



# Application for Employment

Golden Girl Group Home is an  
Equal Opportunity Employer

www.gggh.org

## PERSONAL INFORMATION

DATE APPLIED \_\_\_\_\_

NAME (FIRST MIDDLE LAST)		SOCIAL SECURITY NO.	BIRTH DATE
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
CONTACT PHONE NUMBER	EMAIL	REFERRED BY	

Are you eligible to work in the United States?  Yes  No

Do you have a valid drivers license?  Yes  No

DRIVERS LICENSE STATE	DRIVER LICENSE NUMBER
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Are you at least 22 years of age or older? (If no, you may be required to provide authorization to work.)?  Yes  No

Can you work weekends?  Yes  No

What shifts are you available to work?  Day  Evening  Night

What days are you available to work?

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

Are you able to perform the essential functions of the job for which  Yes  No

you are applying with or without a reasonable accommodation?

(If you are unsure of the essential functions, please ask to review a job description.)

## EMPLOYMENT DESIRED

POSITION DESIRED	SALARY DESIRED	DATE YOU CAN START
ARE YOU CURRENTLY EMPLOYED?	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	
HAVE YOU EVER APPLIED TO GOLDEN GIRL GROUP HOME BEFORE?	WHERE?	WHEN?

## EDUCATION HISTORY

NAME OF SCHOOL	LOCATION OF SCHOOL (CITY/STATE)	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED

## GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING/SKILLS	
U.S. MILITARY SERVICE BRANCH	RANK

## LICENSES OR CERTIFICATIONS

NAME/TYPE	ISSUED BY	ISSUED DATE	EXPIRATION DATE

## FORMER EMPLOYERS: Include your last four positions starting with the most recent

DATE MONTH AND YEAR	NAME & ADDRESS (CITY/STATE) OF EMPLOYER	SALARY	MAY WE CONTACT	POSITION	REASON FOR LEAVING
FROM					
TO					
FROM					
TO					
FROM					
TO					
FROM					
TO					

## REFERENCES

NAME	PHONE NUMBER	BUSINESS	YEARS KNOWN

## AUTHORIZATION: *Please read carefully before signing*

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I understand that as a condition of this application and any employment, I may be required to submit to testing for the presence of illegal drugs. I hereby consent to such testing. I further acknowledge that no promise or guarantee is binding upon Golden Girl Group Home unless made in a written contract of employment as described above.

***THIS APPLICATION IS VALID FOR 1 YEAR FROM THE DATE SIGNED/DATED ABOVE.***

DATE: \_\_\_\_\_ SIGNATURE \_\_\_\_\_