Employment Application

GARRISON FOREST SCHOOL APPLICATION FOR EMPLOYMENT

Garrison Forest School is an equal opportunity employer. Garrison Forest School does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date_____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the U.S? ___Yes ___No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)
___Yes ___No

Have you ever been terminated from employment or asked to resign by an employer? ___Yes ___No

If yes, please provide company names and details _____

Can you work any shift? ___Yes ___No If no, explain: _____

Can you work overtime, including weekends? ___Yes ___No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___Yes ___No

EMPLOYMENT DESIRED

Date you can start _____Hourly rate/Salary desired _____

Position desired _____

Are you currently employed? ____ If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Walk In Advertisement Referral Other

Have you ever worked for this company before?
___Yes ___No Explain_____

Do you know anyone who works for our company? Yes No If yes, who? _____

EDUCATION	**Name and location of school**	**Degree Received**	**Subjects studied/Major**
High School			
College or University			
Trade, Business or Correspondence School			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

_____

REFERENCES

Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Garrison Forest School to hire me. If I am hired, I understand that either Garrison Forest School or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Garrison Forest School has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Garrison Forest School true and complete information on this application. No requested information has been concealed. I authorize Garrison Forest School to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.