

# APPLICATION for EMPLOYMENT

To Be Filled Out Personally By Applicant



GSR, Inc  
voice (510) 885-0400  
fax (510) 885-0456  
22962 Clawiter Rd., Suite 3  
Hayward, CA 94545-1335  
admin@glasr.com www.glasr.com

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 Company.

Please Print

Position applied for \_\_\_\_\_ Date of application \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State ZipCode

Telephone# (\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Previous address (if less than five years) \_\_\_\_\_

Referral Source (How did you hear about us?) \_\_\_\_\_

If you are under 18, and it is required, can you furnish a work permit? \_\_\_yes \_\_\_no

If **no**, please explain \_\_\_\_\_

Have you ever been employed here before? \_\_\_yes \_\_\_no If **yes**, give dates and supervisors \_\_\_\_\_

Are you legally eligible for employment in this country? \_\_\_yes \_\_\_no

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Type of employment desired: \_\_\_Full-Time \_\_\_Part-Time \_\_\_Temporary \_\_\_Seasonal

Driver's license number \_\_\_\_\_ State \_\_\_\_\_ Date of Birth \_\_\_\_\_

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? \_\_\_yes \_\_\_no

If **yes**, please provide date(s) and details \_\_\_\_\_

## EMPLOYMENT HISTORY Starting with your most recent employer, provide the following information:

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_ Dates employed: Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Starting job title \_\_\_\_\_ Final job title \_\_\_\_\_

Immediate supervisor and title \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no \_\_\_later

Why did you leave? \_\_\_\_\_

Summarize the type of work performed and job responsibilities: \_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were the things you liked least about the position? \_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_ Dates employed: Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Starting job title \_\_\_\_\_ Final job title \_\_\_\_\_

Immediate supervisor and title \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no \_\_\_later

Why did you leave? \_\_\_\_\_

Summarize the type of work performed and job responsibilities: \_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were the things you liked least about the position? \_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_ Dates employed: Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Starting job title \_\_\_\_\_ Final job title \_\_\_\_\_

Immediate supervisor and title \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no \_\_\_later

Why did you leave? \_\_\_\_\_

Summarize the type of work performed and job responsibilities: \_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were the things you liked least about the position? \_\_\_\_\_

**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:

Computer Skills (Check where appropriate. Include software titles and years of experience.)

\_\_\_ Word Processing \_\_\_\_\_ Years: \_\_\_\_\_ E-Mail \_\_\_\_\_ Years: \_\_\_\_\_  
 \_\_\_ Spreadsheet \_\_\_\_\_ Years: \_\_\_\_\_ Internet \_\_\_\_\_ Years: \_\_\_\_\_  
 \_\_\_ Presentation \_\_\_\_\_ Years: \_\_\_\_\_ Other \_\_\_\_\_ Years: \_\_\_\_\_

**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
		___ Diploma ___ GED ___ Degree _____ ___ Certification _____ ___ Other _____		
		___ Diploma ___ GED ___ Degree _____ ___ Certification _____ ___ Other _____		
		___ Diploma ___ GED ___ Degree _____ ___ Certification _____ ___ Other _____		

**REFERENCES**

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three schools or personal references who are **not** related to you.

Name	Title	Relationship to you	Telephone	Number of Years Known

**APPLICANT STATEMENT**

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

I expressly authorize, without reservation, the employer, its representatives, employees or agents 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 waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

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.

I understand that this application remains current for 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment,

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 or 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 of America and that federal immigration laws require me to complete an I-9 Form in this regard.

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 (1) eliminate me from further consideration for employment, or (2) 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 \_\_\_\_/\_\_\_\_/\_\_\_\_



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I, \_\_\_\_\_, hereby give my permission to release information concerning myself to GSR, Inc. and release the reference giver from all liability associated with this information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Applicants complete above dotted line only*

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 TO: \_\_\_\_\_ (Company given as reference)

\_\_\_\_\_ has applied for employment with our company and has listed you as a reference. Please answer the following questions and return by mail or fax. Thank You.

Please rate:

	Excellent	Good	Fair	Poor
Performance	_____	_____	_____	_____
Reliability	_____	_____	_____	_____
Cooperation	_____	_____	_____	_____
Quality of Work	_____	_____	_____	_____
Attitude	_____	_____	_____	_____

Would you rehire this person? \_\_\_\_\_ Yes \_\_\_\_\_ No

If "No", please explain:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Other Comments: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_



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- Do you have any physical limitation or medical condition that may interfere with physical work? YES NO  
If yes, please explain \_\_\_\_\_
- Have you had a job where you worked unsupervised? \_\_\_\_\_ YES NO  
Describe \_\_\_\_\_
- Do you have a reliable automobile? \_\_\_\_\_ YES NO
- Have you ever had your license revoked? \_\_\_\_\_ YES NO
- Can you climb a ladder and work from it? \_\_\_\_\_ YES NO
- Can you read and write clearly in English? \_\_\_\_\_ YES NO
- Do you have trouble being on time? \_\_\_\_\_ YES NO
- Can you occasionally be flexible with your hours worked? \_\_\_\_\_ YES NO

List of skills and experience you would like us to consider in reviewing your application.

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