



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit#

_____ City State Zip Code

Phone: _____ E-mail Address: _____

Date Available: _____ Social Security No: _____ Date Of Birth: _____

Are you authorized to work in the U.S. Yes No

Are you a citizen of the United Yes No

Have you ever work for this company? Yes No

Have you ever been convicted of a felony? Yes No If so, When? _____

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduated Yes No Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduated Yes No Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduated Yes No Degree: _____

Previous Employment

Company: _____ **Phone:** _____

Address: _____ **Supervisor:** _____

Job Title: _____ **Starting Salary:** _____ **Ending Salary:** _____

Responsibilities: _____

From: _____ **To:** _____ **Reason for Leaving:** _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ **Phone:** _____

Address: _____

Supervisor: _____

Job Title: _____ **Starting Salary:** _____ **End**

Salary: _____

Responsibilities: _____

From: _____ **To:** _____ **Reason for**

Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ **Phone:** _____

Address: _____

Supervisor: _____

Job Title: _____ **Starting Salary:** _____ **Ending**

Salary: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes No

Reference

Please list three personal references.

Full Name: _____

Relationship: _____

Company: _____

Phone: _____

Address: _____

Full Name: _____

Relationship: _____

Company: _____

Phone: _____

Address: _____

Full Name: _____

Relationship: _____

Company: _____

Phone: _____

Address: _____

Driving License Information

Do you have a valid Driving Licenses Yes No If yes, what is your DL # _____

State: _____

Disclaimer and Signature

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

I authorize Gumboh Web to make a through investigation of my employment history and all other facts stated on my application. I hereby release from liability or responsibility all individuals, companies, employers, educational institutions, and/or agencies supplying such information.

Signature: _____

Date: _____

Label1



Consent For Drug/Alcohol Testing

If you are offered and accept employment with Gumboh Web, in the interest of safety for all concerned, you will be required to take a random urine test for drugs and/or alcohol use.

I, _____, have been fully informed of the reason for this urine test for drugs and/or alcohol (I understand what I am being tested for), the procedure involved, and do hereby freely give my consent. In addition, I understand the results of this test will be forwarded to my potential employer and become part of my record.

If this test is positive, and for this reason I am not hired, I understand that I will be given the opportunity to explain the results of this test.

I hereby authorize these test results to be released to Gumboh Web.

Signature:

Date: _____

Visit us @ www.gumbohweb.net



**EMPLOYEE / VOLUNTEER
BACKGROUND AUTHORIZATION FORM**

PERSONAL INFORMATION

NAME: _____

SSN: _____

OTHER NAMES USED: _____

HOME ADDRESS: _____

HOW LONG HAVE YOU LIVED AT CURRENT ADDRESS: _____

PREVIOUS ADDRESS: HOW LONG? : _____

DATE OF BIRTH: _____

DRIVERS LICENSE NUMBER/STATE OF ISSUE: _____

In connection with my application for employment / volunteer agreement with you, I understand that investigative background inquiries are to be made on myself including criminal convictions, motor vehicle and other reports. These reports will include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. Further, I understand that you will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, civil and other experiences.

I authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information.

I release the City of Belleville and any other person and/or agencies from any damage and/or liable acts that may result from obtaining history checks.

The above information is used solely for employment verifications and criminal history checks. Falsifying any information on this release form will constitute grounds for immediate dismissal.

(Applicant's Signature)

(Date)