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# GAUDENZIA ERIE, INC.

## Employment Application

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Gaudenzia Erie, Inc. is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status, or any disability as provided in the Americans with Disabilities Act.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

### PERSONAL:

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

Name: \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_  
LAST, FIRST MIDDLE INT. AC

Present Address: \_\_\_\_\_  
NO., STREET, CITY, STATE, ZIP

Social Security No.: \_\_\_\_\_ Are you over 18?  Yes  No

Driver's License No.: \_\_\_\_\_ Type: \_\_\_\_\_ Currently Valid?  Yes  No

Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if it is required by the job for which you are applying?  Yes  No

If no, please explain: \_\_\_\_\_

Would you be willing and able to relocate?  Yes  No

### EMPLOYMENT DESIRED:

Are you seeking:  full-time  part-time  temporary

Position applied for: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Date available to start \_\_\_\_\_

Have you ever applied or been employed at Gaudenzia Erie, Inc.  Yes  No

If yes, please explain (include dates of previous employment, if applicable)

How did you learn about the position you are applying for at Gaudenzia Erie, Inc.? \_\_\_\_\_

Are you now, or do you expect to be, working in any other business or job?  Yes  No

Are there any days or hours you would be unable or unwilling to work?  Yes  No

If yes, please specify those days and/or hours you will be unavailable to work: \_\_\_\_\_

## WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

**PLEASE GIVE MONTH AND YEAR**

**DO NOT REFERENCE YOUR RESUME**

Name of Employer:	Title: Duties:
Nature of Business:	Dates of Employment From: _____ To: _____
Address:	Salary: Starting: _____ Ending: _____
City, State, Zip Code:	Name and Title of Last Supervisor:
Telephone Number	Reason for Leaving:

Name of Employer:	Title: Duties:
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Telephone Number	Reason for Leaving:

Because of the nature of the work performed at Gaudenzia Erie, Inc., employees who are themselves recovering from substance abuse are hired under special considerations and criteria. Recovering appointees must comply with minimum length of sobriety requirements which apply to the specific position for which they are hired and by accepting a position with Gaudenzia Erie, Inc. agree to abstain from the use of drugs and/or alcohol while employed by Gaudenzia Erie, Inc., If applicable, please give the name, address and telephone number of a personal reference who is familiar with and can verify your sobriety.

**EDUCATION:**

Name Address and Location	Dates	Graduate?	Course Studied
High School/GED	From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma/GED
College	From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Obtained Credits
Trade School	From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Trade/Degree/Certification

List and describe any other school or specialized trainings (including certifications and dates)

List any scholastic honors and/or offices held and activities involved in during high school and college

**MILITARY:**

Have you ever served in the military?  Yes  No

Service Branch: \_\_\_\_\_ Date Entered: \_\_\_\_\_

Date Separated: \_\_\_\_\_ Final Rank: \_\_\_\_\_

**CAPABILITY/RELIABILITY:**

Would you be able to perform all of the tasks required by the job you are applying for?  Yes  No

If not explain which tasks \_\_\_\_\_

Have you ever filed any type of fraudulent claim against any employers?  Yes  No

Will you abide by the safety rules of Gaudenzia Erie, Inc.?  Yes  No

How many days of work (or school) have you missed in the last two years? \_\_\_\_\_

How many times have you been late for work (or school) in the last two years? \_\_\_\_\_

Would you be willing and able to report to work every day on a consistent basis?  Yes  No

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

**SUPPLEMENTAL EMPLOYMENT SKILLS**

If you worked in any of your previous positions under another name, please provide the name (s)

Are you presently employed?  Yes  No

If yes, may we contact your present employer?  Yes  No

Have you ever been fired, or asked to resign from a job?  Yes  No

If yes, please explain

**STATEMENT**

Is there any information that you feel would benefit Gaudenzia Erie, Inc. to make a possible employment decision? Please tell us anything you would like us to know about you (special skills, professional membership, special skills, etc.) Please tell us why Gaudenzia Erie, Inc. interests you as a potential employer and why you feel that you are particularly qualified:

**REFERENCES**

Give three references, no relatives please.

NAMES	ADDRESS	PHONE	OCCUPATION

**EMPLOYEE POLYGRAPH PROTECTION ACT OF 1988 (EPPA)**

The EPPA prohibits Gaudenzia Erie, Inc. from using polygraph tests, either for pre-employment screening or during the course of employment. Gaudenzia Erie, Inc. may not require or request any employee or job applicant to take a polygraph test, or discharge, discipline, or discriminate against an employee or job applicant for refusing to take a test, or for exercising other rights under the Act.

**AFFIDAVIT**

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading, or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize Gaudenzia Erie, Inc. to contact any organization or individual it deems appropriate to investigate my employment history, character and qualifications and I hereby give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that I am employed, I will abide by all the rules and regulations of Gaudenzia Erie, Inc., I understand that the taking of drug and alcohol tests, when given pursuant to Gaudenzia policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that no one at Gaudenzia Erie, Inc. is authorized to enter into any verbal or written employment contracts with me for any definite period of time without the express written consent of the Executive Director. I also understand that my employment is "at will" and may be terminated by myself or Gaudenzia Erie, Inc. at any time for any reason at all, with or without prior notice.

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

**COMPANY USE ONLY**

Interviewed by:

Interviewer's remarks: