

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS:

Please read and answer all of the following questions. Except for your signature, PRINT your responses. No action can be taken on your application until all questions have been answered and the application is signed. None of the questions are intended to imply discrimination or illegal preferences based upon non-job related information.

It is the policy of GarCon LLC that all qualified applicants be given equal opportunity and that selection decisions be based on jobrelated factors. We do not discriminate on the basis of race, color, religion, sex, national origin, age, veteran status, the presence of a non-job related medical condition or disability.

PERSONAL INFORMATION:		Today's Date:
Name:		
Address:		
City, State, ZIP:		
Telephone:		
Email Address:		
-		
TYPE OF EMPLOYMENT DESIR	ED:	
Position:		Salary Desired:
How were you referred to GarCon LL	 C?	
Work Status: ☐ Full Time ☐ Par	Time If Part Time, number	of hours:
What is your field of interest?		
Are you available to work: Overtim	e: 🗆 Yes 🗆 No Weekend	ds: □ Yes □ No Shifts: □ Yes □ No
Date you could start work:		
DRIVING HISTORY:		
Do you currently have a valid driver's	license?	ense Class:
If yes, in what State/ Country?	Re	estrictions?
Have you had your driver's license su		
If yes, explain:	•	



EDUCATION AND TRAINING:

School Level	Name & Location	No. of Years Completed	Diploma, Degree, Certificate	Major
High School or GED				
College/ University				
Vocational or Technical				
Other				

What skills or added training do you have related to the job for which you are applying?

What equipment or machines can you operate related to the job for which you are applying?

List your professional, business or civic activities (Exclude organizations which reveal race, color, religion, sex, national origin, age, veteran status, disability or other protected status):

MILITARY EXERIENCE:

If you have served in the military, what special training have you received that is pertinent to the position for which you are applying:
\square I am re-applying for employment following active military duty.



EMPLOYMENT HISTORY: (Most recent employer first; Account for all time periods, including Military service.)

Name of Employer:	Job Title:	
Address:	Employment Dates: From: To:	
City, State, ZIP:	Wage: Starting: Ending:	
Telephone:	Describe Duties:	
Supervisor's Name:		
Reason for Leaving:		
Name of Employer:	Job Title:	
Address:	Employment Dates: From: To:	
City, State, ZIP:	Wage: Starting: Ending:	
Telephone:	Describe Duties:	
Supervisor's Name:		
Reason for Leaving:		
Name of Employer:	Job Title:	
Address:	Employment Dates: From: To:	
City, State, ZIP:	Wage: Starting: Ending:	
Telephone:	Describe Duties:	
Supervisor's Name:		
Reason for Leaving:		
May we contact your present employer? ☐ Yes ☐ No If no, please explain:	May we contact all other employers? ☐ Yes ☐ No	
Have you ever been dismissed or been forced to resign from any position? \square Yes \square No If yes, please explain:		
Have you worked or attended school under another name? \square Yes \square No If yes, please explain:		



REFERENCES: (PLEASE DO NOT	INCLUDE RELATIVES)	
Name	Address	Telephone Number
SENERAL INFORMATION		
Have you ever applied for empl	oyment with GarCon LLC? Yes No	
	with GarCon LLC in the past? Yes No	
Are you authorized to work in t	he United States? ☐ Yes ☐ No	
Proof of citizenship or Immigrat	tion status will be required upon employment.	
Are you 18 years of age or olde	r? □ Yes □ No	
Have you ever been convicted of	of a Felony? □ Yes □ No	
(A Felony conviction will not neces	sarily be a barrier to employment at GarCon LLC All factors, inclu	ding the nature of the
	on, the rehabilitation and the job for which you are applying will b	oe considered.)
If yes, provide details:		
AUTHORIZATION AND RE	LEASE:	
hanged from time to time at the mployment application to be comp	PLEASE READ CAREFULLY BEFORE SIGNING ment by GarCon LLC, I agree to abide by the rules and regulations sole discretion of company management. I declare each of the olete and true to the best of my knowledge. I understand that an insideration for employment and may result in my discharge from	ne answers I have given in this y false information or omissions

I understand that as a condition of employment, I must be authorized to work in the United States and demonstrate that authorization as required by the Immigration Reform and Control Act of 1986.

I authorize the investigation of all statements contained in this application and authorize any person, school, current employer (unless otherwise noted), past employers and other organizations named in this application to provide relevant information which may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment, it will be contingent upon my successful completion of a posthire Urinalysis drug and alcohol screening and a post-offer physical which is used to assure that I can meet the physical requirements of the job.

I understand that this application or subsequent employment does not create an employment contract nor guarantee employment for any defined period of time. Further, I understand that my employment is "at will" and can be terminated by either myself or GarCon LLC at any time for any reason or for no reason, except as provided in an alternative bona fide employment agreement.

i have read, understand and by my signature agree to the above s	statements.
Applicant Signature	Date
Applicant Signature	Date