

**Goodwill Industries of Southeastern Louisiana, Inc. /Goodworks, Inc.**

**Application For Employment**

*An Equal Opportunity Employer All applications are considered without regard to race, color, sex, age, national origin or disability.*

**Please Print Legibly**

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

Name: \_\_\_\_\_

Last Name

First Name

M.I.

Address: \_\_\_\_\_

Street/Apt. #

City

State

Zip

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

(must apply for a specific position or the application will be considered incomplete)

Briefly describe your interest in and/or qualifications for a position with Goodwill/Goodworks: \_\_\_\_\_

Available to work: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temporary/On-call \_\_\_\_\_

Days Available to work: \_\_\_ Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_ Saturday \_\_\_ Sunday

Hours available to work: \_\_\_ Any \_\_\_ (7:00am - 3:00pm) \_\_\_ (3:00pm - 11:00pm) \_\_\_ (11:00pm - 7:30am) \_\_\_ Other

Date available to begin work: \_\_\_\_\_ Referred by: \_\_\_\_\_

Have you ever been **convicted** of a crime other than a minor traffic violation? No Yes, please explain: \_\_\_\_\_

Are you currently under indictment or otherwise charged or pled guilty to with a crime that has not yet been adjudicated? No Yes, please explain: \_\_\_\_\_

Are you a veteran of the U.S. Armed Forces? No \_\_\_\_\_ Yes \_\_\_\_\_ Branch: \_\_\_\_\_

Have you ever been employed by Goodwill Industries of Southeastern Louisiana/Goodworks? No Yes

Dates of Employment: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Education**

Name/City	Dates (From/To)	Major Study	Degree/Certification
Grammar School			
High School			
Trade School			
College/University			
Other			

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**Employment History**

(Please list all present and past employers beginning with the most recent position.)

May we contact your present employer? No \_\_\_\_\_ Yes \_\_\_\_\_

Name of Company		
Complete Address		
Phone Number (Include Area Code)		Supervisor
Nature of Business/ Position		
Job Duties	_____ _____ _____	
Dates of Employment	From: _____ To: _____	
Reason for Leaving		

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Phone Number (Include Area Code)		Supervisor
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Phone Number (Include Area Code)		Supervisor
Nature of Business/ Position		
Job Duties	_____ _____ _____	
Dates of Employment	From: _____ To: _____	
Reason for Leaving		

I certify that the information given herein is true and complete to the best of my knowledge. I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and does not constitute a contract of employment.

In the event I am employed, I understand that any false, omitted or misleading information given in this application or in my interview(s) may result in immediate discharge. I further understand that, if employed, I will be required to abide by all rules and regulations set forth in the Company's Personnel Policies and Procedures manual and the rules and regulations established by individual divisions and/or work sites.

I understand that employment is contingent upon background checks that are conducted by the Company concerning but not limited to: past employment, criminal convictions & passing a pre-employment drug screen.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant (PRINT NAME LEGIBLY)

Social Security #: \_\_\_\_\_  
(For applicant tracking purposes only)