

APPLICATION FOR EMPLOYMENT

Pre-Employment Questionnaire – An Equal Opportunity Employer



Last Name	First Name			Middle Initial
Present Address	Apt No.	City	State	Zip
Permanent Address (If Different from Present)	Apt No.	City	State	Zip
Are You 18 Years or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Phone Number		Secondary Phone Number	
Are you Currently Authorized to Work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of Eligibility Required Upon Offer of Employment)				

DESIRED EMPLOYMENT

Position Desired	Are You Able to Work Any Shift? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date You Can Start	Hourly Rate Desired
Are You Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, May We Inquire of Your Present Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have You Ever Applied to this Company Before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, When?
Have You Ever Worked for this Company Before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, When?
Reason for Leaving?	
Name of Last Manager/Supervisor at this Company	
How Were You Referred to this Company? <input type="checkbox"/> College Placement Service <input type="checkbox"/> Employment Agency <input type="checkbox"/> State Employment Office <input type="checkbox"/> Internet <input type="checkbox"/> Walk In <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Current Company Employee: (Name) _____ <input type="checkbox"/> Other _____	

EDUCATION

School Level	School Name, City, and State	# of Years Attended	Did you Graduate?	Subjects Studied/Major(s)	Diploma/Degree(s)
High School or Educational Facility					
College					
Additional Schooling					
Trade, Business, Other					

If Applicable, Please List Any Academic Honors, Scholarships, and/or Fellowships, etc. (Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities, or veteran status.)
Please Describe Any Subjects of Special Study, Research, Specialized Training, Apprenticeships, Licenses, Certificates, or Skills.

FORMER EMPLOYEE (Please List Your Last Three Employers – List Your Most Recent Employer First)

Name of Present or Previous Employer			
Address	City	State	Zip
Weekly Starting Pay	Weekly Final Pay	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Manager/Supervisor Name	Manager/Supervisor Title	Telephone Number	
Starting Date	Leaving Date	Position Title	
Summarize the Nature of Work Performed and Job Responsibilities			
Reason for Leaving			

Name of Present or Previous Employer			
Address	City	State	Zip
Weekly Starting Pay	Weekly Final Pay	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Manager/Supervisor Name	Manager/Supervisor Title	Telephone Number	
Starting Date	Leaving Date	Position Title	
Summarize the Nature of Work Performed and Job Responsibilities			
Reason for Leaving			

Name of Present or Previous Employer			
Address	City	State	Zip
Weekly Starting Pay	Weekly Final Pay	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Manager/Supervisor Name	Manager/Supervisor Title	Telephone Number	
Starting Date	Leaving Date	Position Title	
Summarize the Nature of Work Performed and Job Responsibilities			
Reason for Leaving			

REFERENCES (Please Provide the Names and Information of Three Persons Whom You Are Not Related to and Have Known for at Least Three Years)

Name	Address	Telephone Number	Nature of Relationship	Years Acquainted

Have You Ever Been Convicted of a Misdemeanor or Felony? (This Includes All Petty and/or Gross, Etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, Please Explain (Will Not Necessarily Exclude You from Consideration)

***PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING**

AT-WILL EMPLOYMENT

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Gopher Resource (hereinafter referred to as "GR"), such employment with GR is at-will, for no specified duration, and may be terminated by either GR or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, and/or statements of GR or its representatives used during the employee hiring process are deemed contracts of employment, real, or implied. I understand that no representative of GR, except an authorized executive, has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statement, and that any such agreements must be made in writing and signed by the authorized executive of GR.

AUTHORIZATION

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment, regardless of the timing or circumstances of discovery.

I understand that GR retains applications for a period of twelve months from the date of completion. I am welcome to complete a new application at any time.

In consideration for employment with GR, if employed, I agree to comply with the rules, regulations, policies, and procedures of GR at all times, and understand that such obedience is a condition of employment. I understand that due to the nature of GR's business, attendance and punctuality are considered essential requirements of every job at GR, and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with GR, I may be required to submit to a pre-employment medical examination, substance screening, and consumer report as a condition of employment. I understand that unsatisfactory results, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THE ABOVE STATEMENTS.

_____ Date

_____ Signature