



Application for Employment

Goodwill Industries of Greater Nebraska, Inc

Corporate Office: 1804 South Eddy Street, PO Box 1863, Grand Island NE 68802 Telephone 308.384-7896

We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in considering you for the position for which you apply. Feel free to attach to this application any additional information which you feel will be helpful in evaluating your qualifications. Please answer all questions and fill in all information to the best of your knowledge. Please print or write legibly. If you have a disability and need help to fill out this application form, you may notify the person who gave you this form and reasonable efforts will be made to accommodate your needs.

NAME

_____ [Last] _____ [First] _____ [Middle] _____ [Date]

Present Address

_____ [Number and Street] _____ [City] _____ [State] _____ [Zip Code]

Telephone Number

[Home] _____ [Cell] _____

Are you prevented from lawfully becoming employed in this country? Yes No

If hired, you will be required to submit documents sufficient to establish employment authorization and identity in compliance with the Immigration Reform and Control Act of 1986. While you need not provide this proof of citizenship or immigration status at the time you are interviewed, please be prepared to assure us that you can do so immediately upon being hired.

Have you previously applied to Goodwill? Yes No If "yes" When? _____

Have you ever been employed by Goodwill? Yes No If "yes" When? _____

Please check if you are over 18: Where you employed by Goodwill? _____

Position applied for

Rate of pay required _____ Per Hour Month Year

Will you work (check all that apply) Full time Part time Temporary Days

Evenings Weekends Overtime

Have you ever been convicted of a felony? (Do not include arrests without conviction, charges expunged, convictions adjudged "Youthful Offender" or "Juvenile," or convictions for minor traffic violations.)

Yes No

If yes, please briefly describe the circumstances of your conviction and your name at the time, if different; indicate the date, nature, and place of the offense and disposition of the case including any rehabilitation. Your answer is looked upon as only one of the factors considered in the employment decision and is evaluated in terms of the nature, severity, and date of the offense.

DRUG SCREENING EMPLOYER EQUAL OPPORTUNITY EMPLOYER

All qualified applicants will receive consideration without regard to color, religion, gender, national origin, age, disability, protected veteran status and individuals with disabilities, or any other status protected by law.

EDUCATION

School	Name and Address	Course or Major Area	Number of Years Completed	Graduated		If Graduated, Certificate or Degree Awarded
				YE S	NO	
High School						
College						
Business / Trade						
Other						

WORK EXPERIENCE

List below your prior employment in order, beginning with your most recent employer.

Company Name:	Employed from _____ to _____
Address – Street:	Pay Rate: Start: _____ End _____
City: State Zip	Job Title
Telephone:	Name of Supervisor
Job Duties:	
Reason for Leaving:	
Company Name:	Employed from _____ to _____
Address – Street:	Pay Rate: Start _____ End _____
City: State Zip	Job Title:
Telephone:	Name of Supervisor:
Job Duties:	
Reason for Leaving:	
Company Name:	Employed from _____ to _____
Address – Street:	Pay Rate: Start _____ End _____
City State Zip	Job Title:
Telephone:	Name of Supervisor:
Job Duties:	
Reasons for Leaving:	

May we contact your current employer for a reference? Yes No

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Have you ever been discharged or asked to resign? Yes No

If yes, explain in full: _____

Veteran of the U.S. Military Service? Yes No

If yes, Branch: _____

You have already listed your work experience and education. Are there other qualifications you have which are related to the position for which you are applying? _____

REFERENCES

Please list two business and two personal references. Indicate relation to you, such as superior, coworker, personal, etc.

Name	Address	Telephone No.	Relationship	Occupation	Years Known
	Street:	Home			
	City/State/Zip:	Work			
	Street:	Home			
	City/State/Zip:	Work			
	Street:	Home			
	City/State/Zip:	Work			
	Street:	Home			
	City/State/Zip:	Work			

GENERAL INFORMATION

What Prompted your application?

Other Agency _____

- Employee Referral Internet Posting
 Friend Referral Advertising Radio TV Newspaper

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The information I have furnished to Goodwill Industries of Greater Nebraska, Inc., is correct to the best of my knowledge. I understand that:

Falsification of this information is grounds for retraction of employment offer or disciplinary action, including dismissal if I have been employed.

My employment with Goodwill of Greater Nebraska, Inc., is voluntarily entered into and I am free to resign anytime. Similarly, Goodwill may terminate my employment at any time where it believes it is in the Company's interests.

I agree to submit to a drug screen following a conditional job offer, or thereafter, as requested by Goodwill, and understand my initial and continued employment is contingent upon my meeting such medical standards as the company may then have in effect.

Employment may be contingent upon my submitting to a physical examination, if applicable, to assure that I am physically able to perform the essential functions of the position for which I am applying.

Employment is subject to verification of the information I have provided on this application and any related documents or resumé.

I understand and agree that Goodwill may make an investigation of my personal history, financial, and credit record through any bureau, fair credit report, or agency. I have the right to make written request within a reasonable time period to receive complete information about the nature and scope of this investigation.

Goodwill will not make any unwarranted disclosure of information generated in the application process to persons outside the company without my consent.

Only U.S. citizens and aliens legally authorized to work in the U.S. are eligible for employment and that my eligibility will be subject to verification, as required by law, if I am selected for employment.

I, the undersigned certify that the above information given by me is correct.

My signature states that I have read and fully understand the above Applicant Statement.

Signature

Date

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