

Goodwin College

APPLICATION FOR EMPLOYMENT

Goodwin College is an Affirmative Action/ Equal Opportunity Employer.

Please complete all spaces on this application even if a resume is submitted. Do not state "Please see resume". Goodwin College is an Affirmative Action/Equal Opportunity employer and does not discriminate on the basis of race, creed, color, national origin, sex, sexual orientation, age, marital status, or disability or any other lawfully protected status.

P E R S O N A L	Last Name First Middle			Date
	Street Address			Home Telephone ()
	City, State, Zip			Business Telephone ()
	Have you ever applied for employment with us? Yes No If yes: Month and Year _____ Location			Social Security #1
	Position Desired			Pay Expected
	<i>This space left intentionally blank</i>			Will you work overtime if asked? Yes No
	Employment Eligibility Are you lawfully authorized to work in the United States? Yes No			When will you be available to begin work?
	Have you ever been convicted of a felony? Yes No Date(Year): _____ If Yes, please explain:			

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate Circle one	Degree or Diploma
	Graduate				Yes No <input type="text"/> Year	
	College				Yes No <input type="text"/> Year	
	College				Yes No <input type="text"/> Year	
	Business/ Technical				Yes No <input type="text"/> Year	
	High School				Yes No <input type="text"/> Year	

Do you hold any professional licensure/certification?

Yes No List Licensure/Certification here

List any special training or skills (language, machine operation, etc.)

1 Completion of Social Security number is optional. Failure to submit Social Security information on this application will not preclude employment consideration. An individual's Social Security number may be required on other forms prior to, or after commencement of, employment.

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. To be considered for employment, **please do not omit rates of pay.**

1	Company Name	Telephone ()
	Address	Employed - (State month and year) From To
	Name of Supervisor Supervisor's Title	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving
2	Company Name	Telephone ()
	Address	Employed - (State month and year) From To
	Name of Supervisor Supervisor's Title	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving
3	Company Name	Telephone ()
	Address	Employed - (State month and year) From To
	Name of Supervisor Supervisor's Title	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving
4	Company Name	Telephone ()
	Address	Employed - (State month and year) From To
	Name of Supervisor Supervisor's Title	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving
5	Address	Employed - (State month and year) From To
	Name of Supervisor Supervisor's Title	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

DO NOT CONTACT

We may contact the employers listed above unless you indicate those you do not want us to contact.

Employer Number (s) _____ Reason _____

FOR EMPLOYER'S USE ONLY

R E F E R E N C E C H E C K	Employer	Person Contacted	Results
	1		
	2		
	3		
	4		

I N T E R V I E W R E S U L T S	Interviewer Name and Comments