Employment Application



The information given on this form is solely for the use of Gajeske, Inc. and will be held in the strictest confidence. It will be to the applicant's advantage to answer each question fully and accurately. The use of this form does not indicate that there are any positions open and does not obligate the Company in any way.

			Date				
	Please Print						
	Last Name	First	Middle	Email Address			
	Present Address- Street	City, State	Zip Code	Contact Telephone Number			
_	Alternate Address– Street	City, State	Zip Code	Alternate Telephone Numbe			
rsona	Referred by:	Date Available for Employment	Eligible to Work in United States? Yes No				
Per	Position (s) Applied For:	Starting Salary Desired	Geographical Locations Preferred				
	Are you willing to: Travel? Yes \(\) No \(\)	Work Overtime? Yes ☐ No ☐	Transfer? Yes \[\]	lo 🗆			
	Are you at least 18 years of age? Yes No	Have you previously worked for our company? Yes ☐ No ☐					
	Must be completed in its entirety, include	ling salary information.					
	Present (or last) Company Name	Address	City, State	Phone #			
	Dates: From – To	Starting Base Salary \$	Current Base Salary	May we contact? Yes ☐ No ☐			
	Job Title	Supervisor	Reason for Leaving				
pur	Previous Employer Company Name	Address	City, State	Phone #			
ground							
상	Dates: From – To	Starting Base Salary \$	Ending Base Salary \$				
t Ba	Job Title	Supervisor	Reason for Leaving				
yment	Brief description of duties (include number of persons supervised, if applicable)						
Emplo)	O Davidous Faralous Company Name	Address	City Obsta	Dhara #			
ш	3. Previous Employer Company Name	Address	City, State	Phone #			
	Dates: From – To	Starting Base Salary \$	Ending Base Salary \$				
	Job Title	Supervisor	Reason for Leaving				
	Brief description of duties (include number of persons supervised, if applicable)						

GAJESKE, INC IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE AGAINST APPLICANTS OR EMPLOYEES ON THE BASIS OF RACE, COLOR, SEX, AGE, RELIGION, NATIONAL ORIGIN, OR DISABILITY.

	Schools Attended and Location	Dates Attended From To	Major	Type of Degree	Diploma or GED Received YES NO		Date of Graduation (Mo/ Yr)			
	High School									
ducation	College									
	College									
Ед	College									
	Special Awards or Recognitions			* If no degree obtain	ned, indicate numb	er of college cred	it hours completed			
ary	Active Duty Branch Dates of Active Duty Highest Rank Attained									
Military	Reserve Status Reserve Branch									
Criminal	Gajeske, Inc. will conduct a background check on all candidates selected for a position. While candidates with a criminal background will not be immediately excluded from consideration, Gajeske, Inc. reserves the right to exclude from consideration individuals who have a conviction within the past seven years for certain crimes, occurrence of multiple crimes, or frequency of the same crime(s). Failure to disclose criminal convictions within the last seven years on the background authorization acknowledgement/authorization (included with new hire paperwork for selected candidates) may result in immediate termination for falsifying a company document.									
	List office skills, trades, abilities or license ce	rtifications that may be be	neficial in the job	for which you are applyin	α					
Skills	S									
	List three professional references mo	ist three professional references most familiar with your abilities (supervisors preferred). Name and Association Occupation Email Address Phone Number								
ces	Years Known	•								
eren	Name and Association Years Known	Occupation		Email Address	Phone Number					
Ref	Name and Association Years Known	Occupation		Email Address		Phone Number				
AF	PPLICANT'S STATEMENT (App	licant must review	and sign be	elow.)						
I affirm that I have read and fully completed both sides of this application and all information as written above is true and correct. I acknowledge that I may be terminated at any time if any information I supply is false. I acknowledge that this application will remain active for no more than 45 days. If I wish to be considered for employment after this 45 day period, I will reapply. I understand that if I am employed by Gajeske, Inc. my employment and compensation can be terminated, with or without cause and with or without prior notice.										
I authorize the references listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I furthermore authorize Gajeske, Inc. to conduct a background check so that they may confirm the information I have provided on this application is true and correct. Moreover, I authorize Gajeske, Inc. to require I pass a drug test to gain employment or remain employed with Gajeske, Inc.										
I grant Gajeske, Inc. the right to withhold, retain or deduct an amount up to and including the total amount of indebtedness, advances, charges for personal purchase on Company accounts, or any other amounts owed to Gajeske, Inc., or any of its affiliates, subsidiaries, or divisions, from my salary, wages, commissions, reimbursements or final pay subject to compliance with applicable state and federal wage and hour laws.										
an	I understand that I am required to abide by all rules and regulations of Gajeske, Inc. I acknowledge that these policies and procedures, and any benefits or other terms and conditions of my employment, may be changed, interpreted, withdrawn or added to by the Company at any time without prior notice to me.									
SI	GNATURE OF APPLICANT				DATE	<u> </u>				