

Application of Employment

Date	

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Personal Inf	ormation										
<u>Last Name</u>		First Na		<u>MI</u>			Social Security Number				
								_	_		
Current Address:				<u>City</u>			•	State	Zip		
Permanent or Mailing A	ddress (if different	from above):		<u>City</u>			State Zip				
Home Phone	Ce	ll Phone		Referred By:				Date of Birth (E-Verify Requiremen			
Position Desi	rod										
Position Applying For			Date you c	an start:			Desired Wa	ige:			
							•				
							\$	pe	er		
Have you previously Gallagher's?	been employed at	If yes, which loca	ation/locations	and the dates of your	r employi	ment?					
Yes	No										
100	140										
***	•=•.	-									
Work Availab	ility:										
Monday	Tuesday	Wednes	Wednesday Thu		ırsday Friday		S	aturday Sund		<u>.</u>	
Day	Day	Day		Day		Day		Day	Day	_	
Night	Night	Nigh	t	Night		Night		Night	Night	t	
Former Emplo	yers										
Employer's Name:	-	City &	& State			Dates of Em	ployment:				
						From:		To):		
						1 10111		1)		
Position	Wage			Reason for leaving							
	\$	per									
Duties		5	Supervisors Name				May we contact				
									Yes	No	
Employer's Name: City & State			& State	Dates of Employs			ployment:				
						Erom		Та			
						From: _		10):		
Position	Wage	l l]	Reason for leaving	<u> </u>						
	\$	per									
Duties				Supervisors Name				Max	y we contact		
Duties			,	Supervisors iname				ivia	Yes	No	
									103	110	

Former Emplo	yers (cont.)							
Employer's Name:		City & State			Dates of Employment:			
					From:	To:		
Position	Wage		Reason	for leaving				
	\$	per						
Duties			Supervis	sors Name		May we contact		
					Yes	No		
Education Hist	tory	City & State		Years Attended	1	Did you graduate?		
riigii selicor		City & State				Yes	No	
- C !!		Gir o Gr			To			
College		City & State		Years Attended	1	Did you graduate?	No	
				From	To	_ 103 10		
Technical or Vocationa	ıl	City & State		Years Attended	i	Did you graduate?	N _a	
				From	То	Yes	No	
Other: Have you ever be If you answered y			Yes	No				
employed, falsified I authorize investig concerning my pre Gallagher's from a I also understand employment for all signed by a corpo	d statements or gation of all state evious employmall liability for an and agree that my specified per rate officer of Gerstand that if I	this application tements contained the tement and any performance that makes the temporal tem	shall be ground the distribution of the shall be ground the shall be ground the shall be ground to the shall be gr	unds for dismission dismission they may mutilization of er's has any augreement controllist company is	sal. s listed above to gire have, (personal or such information. thority to enter into eary to the forgoing	ledge. I understand that ve you any and all informotherwise), and release any agreement for any unless it is in writing a seans that either the com	mation e ind	
Signature:				Date				