

# **EMPLOYMENT APPLICATION**

Please complete the entire application.

## **Employer Information**

Employer:	Gilco Spring of Florida
Address:	3991 Tampa Road
City/State/ZIP:	Oldsmar, Florida 34677
Telephone:	813-855-4631

It is the policy of Gilco Spring of Florida to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

#### **Applicant Information**

Applicant Full Nam	e:				
Home Address:					
City/State/ZIP:					
Number of years at	this address:				
Daytime phone:			g phone:		
Mobile phone:					
Social Security Nun	nber:				
Driver's License (St	ate/Number):	<u>-</u>			
Job Position Appli	ed For:				
Full or Dort Time?				_	
Full or Part Time?					
Salary Desired:	\$	per			
<u>Are you at least 18</u>	years old?	Yes	No		
Are you willing to v	vork any shift, i	ncluding nig	hts and weekends?	?Yes_	No
If applicable, are yo	u available to w	ork overtime	e? Yes	No	



If you are offered employment, when would you be available to begin work?

If hired, are you able to submit proof that you are legally eligible for employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

#### **Applicant's Skills**

List any skills that may be useful for the job you are seeking.

## **Applicant Employment History**

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name:	
Supervisor Name:	
Address:	
City/State/ZIP:	
Job Duties:	
Reason for Leaving:	
Dates of Employment (Month/Year):	
Employer Name:	
Supervisor Name:	
Address:	
City/State/ZIP:	
Job Duties:	
Reason for Leaving:	



#### **Applicant's Education and Training**

College/University Name and Address

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_ No If yes, degree(s) received: \_\_\_\_\_

High School/GED Name and Address

Did you receive a degree? Yes No

\_\_\_\_\_

Other Training (graduate, technical, vocational):

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements:

#### References

List any two non-relatives who would be willing to provide a reference for you.

Name:	
Address:	_
City/State/ZIP:	
Telephone:	
Relationship:	
Name:	
Address:	
City/State/ZIP:	
Telephone:	
Relationship:	

Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:



## CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Gilco Spring of Florida to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to communicate information fully and freely regarding my previous employment, attendance, and grades. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment and education.

If an employment relationship is created, I understand that the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE DATE