



General Interest Form

Personal Data						DATE: _____					
Last Name				First		Middle					
Present Home Address (number, street, apt, box)						Home Phone		Other Phone			
City			State		Zip Code		Email				
<input type="checkbox"/> YES <input type="checkbox"/> NO		Can you, after acceptance of employment, submit verification of your legal right to work in the United States?									
<input type="checkbox"/> YES <input type="checkbox"/> NO		Have you ever been convicted of a felony other than for possession, use or sale of marijuana that has not been resolved by a pre- or post-trial diversion program? A conviction will not necessarily disqualify you from consideration for this job. If yes, please explain.									
Referral Data											
How were you referred to Garden City?				<input type="checkbox"/> Employee Referral <input type="checkbox"/> Advertisement <input type="checkbox"/> Other							
Please identify Name of Employee, Advertisement Source, Agency or Other source.											
Position Data											
Position(s) desired											
Salary requirements				Date available to start _____							
Employment Sought		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME		Are you currently employed?		<input type="checkbox"/> YES <input type="checkbox"/> NO		If yes, may we contact employer?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Can you perform the essential functions of the position applied for, with or without reasonable accommodation?								<input type="checkbox"/> YES		<input type="checkbox"/> NO	
Education											
	Name of School			Location (City and State)			Major/Minor GPA		Graduated		
High School									<input type="checkbox"/> YES <input type="checkbox"/> NO		
College									<input type="checkbox"/> YES <input type="checkbox"/> NO		
Graduate or Business									<input type="checkbox"/> YES <input type="checkbox"/> NO		
Other									<input type="checkbox"/> YES <input type="checkbox"/> NO		
Relevant Skills											

Professional/Business References

Name	Title	Relationship	Company	Phone Number

Dates Employed							
From		Company Name			Supervisor		
To		Last Position			Phone No.		
Address			City		State	Zip Code	
Salary			Reason For Leaving				
Start							
End							

Dates Employed							
From		Company Name			Supervisor		
To		Last Position			Phone No.		
Address			City		State	Zip Code	
Salary			Reason For Leaving				
Start							
End							

Dates Employed							
From		Company Name			Supervisor		
To		Last Position			Phone No.		
Address			City		State	Zip Code	
Salary			Reason For Leaving				
Start							
End							

Signature

I certify that the information contained in this employment application and my resume that I provided to Garden City is complete, correct and accurate to the best of my knowledge and I understand that any falsifications or omissions may result in denial of employment or dismissal. I further agree that upon acceptance of employment I am able to verify my right to work in the United States. I authorize Garden City to investigate the accuracy of this information, including criminal and DMV records from any person or organization, and I release Garden City and all persons and organizations from all claims and liabilities of any nature arising from such investigation or the supplying of information for such investigations. I understand and agree that employment by Garden City is conditional upon the results of such investigation. If an employment relationship is established, I understand that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time by either Garden City or myself. In addition, if accepted for employment, I hereby agree to abide by the rules, policies, and practices of Garden City. I also agree that if an employment relationship is established, I will submit any and all disputes arising from my employment with Garden City to final and binding arbitration under the employment dispute resolution procedures of the AAA.

Signature _____

Date _____