

# APPLICATION FOR EMPLOYMENT

GOODWIN-LASITER-STRONG  
1609 S. CHESTNUT, SUITE 202  
LUFKIN, TEXAS 75901  
(936) 637-4900 Fax (936) 637-6330

4077 CROSS PARK DRIVE  
SUITE 100  
BRYAN, TEXAS 77802  
(979) 776-9700 Fax (979) 776-3838

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

This application will be kept on file for thirty (30) days.

(PLEASE PRINT CLEARLY)

Date of application: \_\_\_\_\_

Referral source:

Advertisement

Friend

Position(s) applied for: \_\_\_\_\_

Relative

Employment Agency

Walk-In

Other \_\_\_\_\_

Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Number Street City State Zip*

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
*Area Code*

Email Address: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_

If employed and you are under 18, can you furnish a work permit?  Yes  No (If yes, Date: \_\_\_\_\_)

Have you ever filed an application here before?  Yes  No (If yes, Date: \_\_\_\_\_)

Have you ever been employed here before?  Yes  No (If yes, Date: \_\_\_\_\_)

Are you employed now?  Yes  No

If so, may we contact your employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No

On what date would you be available for work? \_\_\_\_\_

Are you available for work:  Full-time  Part-time  Temporary

Are you on a lay-off and subject to recall?  Yes  No

Do you have any responsibilities that conflict with the job attendance or travel requirements?  Yes  No

Have you ever been convicted of any crime?  Yes  No

If yes, please specify when, where, and disposition of offense. (A conviction will be considered only as it relates to fitness to perform the job being sought). \_\_\_\_\_

List professional, trade, business or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex or national origin.): \_\_\_\_\_

Give name, address and telephone number of three references who are not related to you and are not previous employers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, sex or national origin.

_____ <i>Employer - Company Name</i>	_____ <i>Supervisor's Name</i>	<u>Dates Employed</u> From: _____ To: _____
_____ <i>Employer - Address</i>	_____ <i>City, State &amp; Zip</i>	<u>Hourly Rate / Salary</u> Start: _____ Final: _____
_____ <i>Employer - Phone Number</i>		<u>Job Title</u> _____
_____ <i>Work Performed</i>		
_____ <i>Reason for Leaving</i>		

_____ <i>Employer - Company Name</i>	_____ <i>Supervisor's Name</i>	<u>Dates Employed</u> From: _____ To: _____
_____ <i>Employer - Address</i>	_____ <i>City, State &amp; Zip</i>	<u>Hourly Rate / Salary</u> Start: _____ Final: _____
_____ <i>Employer - Phone Number</i>		<u>Job Title</u> _____
_____ <i>Work Performed</i>		
_____ <i>Reason for Leaving</i>		

<hr/>		<u>Dates Employed</u>
<i>Employer - Company Name</i>	<i>Supervisor's Name</i>	From: _____ To: _____
<hr/>		<u>Hourly Rate / Salary</u>
<i>Employer - Address</i>	<i>City, State &amp; Zip</i>	Start: _____ Final: _____
<hr/>		<u>Job Title</u>
<i>Employer - Phone Number</i>		_____
<i>Work Performed</i>		_____
<i>Reason for Leaving</i>		_____

<hr/>		<u>Dates Employed</u>
<i>Employer - Company Name</i>	<i>Supervisor's Name</i>	From: _____ To: _____
<hr/>		<u>Hourly Rate / Salary</u>
<i>Employer - Address</i>	<i>City, State &amp; Zip</i>	Start: _____ Final: _____
<hr/>		<u>Job Title</u>
<i>Employer - Phone Number</i>		_____
<i>Work Performed</i>		_____
<i>Reason for Leaving</i>		_____

*If you need additional space, place continue on a separate sheet of paper.*

Special Skills and Qualifications

Summarize your special skills and qualification acquired from employment or other experience \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**EDUCATION**

	Elementary	High School	College / University	Graduate / Professional
School Name(s)				
Year(s) Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree				
Course of Study				

Honors received: \_\_\_\_\_

\_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Applicant's Statement**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all policies and procedures of the Company.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

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**FOR PERSONNEL USE ONLY**

Arrange Interview?     Yes             No            If yes, interview date: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employed?             Yes             No

Date of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_

By: \_\_\_\_\_  
*Name and Title*

Date: \_\_\_\_\_  
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