



Sandusky Bay Area Goodwill Industries, Inc.
 419 W. Market Street, Sandusky, Ohio 44870
 Phone: 419 625-4744 Fax: 419 625-4692

EMPLOYMENT APPLICATION

DATE: _____

PERSONAL DATA (PLEASE TYPE OR PRINT)

LAST NAME,		FIRST,	MIDDLE	SOCIAL SECURITY #	
ADDRESS STREET / P.O. BOX			CITY	HOME PHONE # :	BEST TIME TO CONTACT?
STATE	ZIP CODE	EMAIL:		CELL PHONE # :	OTHER CONTACT # :

How did you find out about the position you are applying for (Circle those that apply)?

Friend/Relative
 Goodwill Employee
 Employment Agency
 Internet
 College/School
 Newspaper Advertisement (Which paper?) _____
 Other _____

POSITION APPLIED FOR:	DATE AVAILABLE:	SHIFT/S (Circle all that apply): Mornings Afternoons Evenings	Day/s Available (Circle all that apply): Sun Mon Tue Wed Thu Fri Sat
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TYPE OF EMPLOYMENT DESIRED: FULL TIME: _____ PART TIME: _____ OTHER: _____ DESIRED SALARY RANGE: _____

IS THERE ANYTHING THAT WILL PREVENT YOU FROM MEETING THE REQUIRED WORK SCHEDULES? YES _____ NO _____

IF YES, WHAT: _____

ARE YOU AT LEAST 18 YEARS OF AGE? YES _____ NO _____

IF YOU ARE UNDER 18, CAN YOU PROVIDE A WORK PERMIT IF NECESSARY? YES _____ NO _____

HAVE YOU EVER WORKED FOR SBA GOODWILL INDUSTRIES BEFORE? YES _____ NO _____

IF YES, WHERE: _____

IF YES, PLEASE LIST DATES: _____

DO YOU HAVE ANY RELATIVES WORKING FOR SBA GOODWILL INDUSTRIES? YES _____ NO _____

IF YES, PLEASE LIST: _____

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES ON A FULL-TIME BASIS? (Circle one)
 YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION? (Circle one)
 YES NO

(Criminal Convictions will not necessarily disqualify applicants from employment.)

Offense(s): _____

If yes, when? _____ Where: _____

EDUCATION

School:	Elementary	High School	College/University	Graduate/Professional
Highest Level Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
School Attended				
Diploma/Degree				
Course of Study				

TRADE, BUSINESS, OR VOCATIONAL SCHOOL	NUMBER OF YEARS ATTENDED: _____	DEGREE
	GRADUATED: YES _____ NO _____	

SKILLS AND QUALIFICATIONS: Summarize additional skills, licenses/certifications and qualifications acquired from past employment, experience, education or training.

SBA GOODWILL INDUSTRIES, INC. IS AN EQUAL OPPORTUNITY EMPLOYER

APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX, EXCEPT WHERE SEX IS A BONAFIDE OCCUPATIONAL QUALIFICATION, SEXUAL ORIENTATION, MARITAL STATUS, INDIVIDUALS WITH DISABILITIES, AND EQUALLY TO DISABLED VETERANS. OTHER PROTECTED VETERANS AND VETERANS OF THE VIETNAM ERA.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. EMPLOYER		DATE EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
May we contact for reference?				
Yes <input type="checkbox"/>		No <input type="checkbox"/>		
REASON FOR LEAVING:				
2. EMPLOYER		DATE EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
May we contact for reference?				
Yes <input type="checkbox"/>		No <input type="checkbox"/>		
REASON FOR LEAVING:				
3. EMPLOYER		DATE EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
May we contact for reference?				
Yes <input type="checkbox"/>		No <input type="checkbox"/>		
REASON FOR LEAVING:				
4. EMPLOYER		DATE EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
May we contact for reference?				
Yes <input type="checkbox"/>		No <input type="checkbox"/>		
REASON FOR LEAVING:				
5. EMPLOYER		DATE EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
May we contact for reference?				
Yes <input type="checkbox"/>		No <input type="checkbox"/>		
REASON FOR LEAVING:				

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

REFERENCE INFORMATION

Provide contact information for 3 professional references.

Name: _____ Company: _____

Phone Number: _____ Title: _____

Name: _____ Company: _____

Phone Number: _____ Title: _____

Name: _____ Company: _____

Phone Number: _____ Title: _____

Read Before Signing

I understand that this application does not constitute an employment contract or an offer of employment. I further understand that if I am offered a position of employment, that my employment will be "at will", and that either I or the company may terminate the employment at any time for any reason with or without cause and with or without notice. I also understand that no individual representative of the company, other than the president, may alter this employment relationship, either verbally or in writing. I understand that I must at all times abide by the company's rules and regulations.

I authorize the investigation of all statements contained herein. I further authorize the references and employers listed above to give you any and all information concerning my previous employment and pertinent information they have, from all liability for any claim or damage that may result from furnishing such information from you.

I certify that the information I have given on this application is true and complete to the best of my knowledge and belief. I understand that any false information provided on this application or at the time of any interview(s) may be cause for immediate discharge. I understand that this application must be filled out completely in order for me to be considered for employment. I further understand that it will remain active for 90 days only; after which time I must reapply.

Signature of Applicant

Date

VOLUNTARY SELF-IDENTIFICATION

SBA GOODWILL INDUSTRIES, INC. is an Equal Opportunity Employer. The Equal Employment Opportunity Commission has provided the following statement about the voluntary nature of this inquiry and requires that we ask the questions below.

SBA GOODWILL INDUSTRIES, INC. is subject to certain federal recordkeeping and reporting requirements. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse consideration/treatment. This information will be used in accordance with the provisions of applicable laws, executive orders and regulations.

Ethnicity & Race

1. Are you Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race)
 YES (Proceed to **Veteran Status**) NO (Proceed to next question)
2. What is your race?
 White
 Black/African American
 Native Hawaiian or Other Pacific Islander
 Asian
 American Indian or Alaska Native
 Two or More Races (All persons who identify with more than one of the above 5 races.
Please list your races:

Veteran Status

1. Are you a Vietnam-Era Veteran? YES NO
2. Are you a Special Disabled Veteran? YES NO
3. Other Protected Veteran? YES NO

"FOR INTERNAL USE ONLY"

1ST INTERVIEW	
DATE:	_____
TIME:	_____
HIRED:	YES NO
	(Circle one)

2ND INTERVIEW	
DATE:	_____
TIME:	_____
HIRED:	YES NO
	(Circle one)

PHYSICAL / LAB: _____	ORIENTATION DATE/TIME: _____	
BACKGROUND CHECK: _____	WORK LOCATION: _____	
START DATE: _____	POSITION: _____	SHIFT: _____
AVAILABLE TO WORK REQUIRED HOURS?:	YES NO	(Circle one)
DAYS AVAILABLE TO WORK:	Sun Mon Tue Wed Thu Fri Sat	
NOTE: Factory Hours are from 6:00 am - 10:00 pm Monday - Friday Store Hours are 8:00 am - 10:00 pm on Monday - Saturday and 11:00 am - 6:30 pm on Sundays.		