



JOB APPLICANTS – PLEASE READ THIS CAREFULLY

Congratulations on taking the first step towards becoming an employee of General Production Service. It is important that you read and follow these instructions:

1. Ensure you fill-out the GPS Application for Employment completely. If a question or space does not apply to your situation, indicate “not applicable” “N/A” or “None”.
2. If there is not enough room in the space provided on the application, attach a sheet to the application providing the additional information.
3. If you attach additional sheet(s) with information to the application to sign and date the additional sheets.
4. **DO NOT PROVIDE COPIES OF ANY DOCUMENTATION WITH THE APPLICATION.** Any documentation for the purpose of verification and/or validation of information and as a prerequisite for the position will be requested from you after GPS offers you a position and you accept employment with GPS. If hired, you will be required to produce all necessary documentation on the first day of employment with GPS. **Failure to provide the appropriate documentation to GPS after an offer and acceptance of employment may result in the offer being rescinded or termination of employment.**
5. You may take the GPS application with you, however, unless the application is accurately completed; including requested dates, addresses, and telephone numbers; signed and dated you may not be considered for employment.
6. If you are offered a position with GPS, the offer will be contingent upon being physically qualified to perform the essential functions of the position, and passing a post-offer drug screen. GPS will require you to undergo a post-offer/pre-employment physical examination at our designated Occupational Medical Group to ensure that you can perform the essential functions of the position safely.
7. Please sign and date this instruction form acknowledging receipt of these instructions, and return it with your application.

Applicant Signature

Date

Applicant Printed Name

**EOE
M/F/D/V**



GENERAL PRODUCTION SERVICE, INC.

Application for Employment

We appreciate your interest in General Production Services and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will help us potentially place you in a position that meets your objectives and those of the organization. Qualified applicants are considered for positions without regard to race, color, religious creed (all aspects of religious belief, observances and practices including religious dress and grooming practices), sex (pregnancy, breastfeeding, childbirth, and related medical conditions), national origin, ancestry, sexual orientation, age (over 40), marital status (including registered domestic partner status), gender identity, medical condition (as defined by law), mental disability, physical disability, except where physical fitness is a valid occupational qualification, or other status protected by State or Federal law, genetic information, gender expression, military and veteran status.

PERSONAL INFORMATION			APPLICATION DATE		
LAST NAME		FIRST NAME	MIDDLE INITIAL	PRIMARY TELEPHONE NUMBER:	
PRESENT STREET ADDRESS		CITY	STATE	ZIP CODE	REFERRED BY:
ARE YOU LESS THAN 18 YEARS OF AGE <input type="checkbox"/> YES <input type="checkbox"/> NO		UPON OFFER OF EMPLOYMENT I UNDERSTAND THAT I MUST PROVIDE DOCUMENTATION OF MY LEGAL RIGHT TO WORK IN THE UNITED STATES <input type="checkbox"/> YES <input type="checkbox"/> NO		HAVE YOU WORKED UNDER ANOTHER NAME IN THE PAST: <input type="checkbox"/> YES (If yes, please provide Name(s) below): <input type="checkbox"/> NO	
DO YOU POSSESS A VALID VEHICLE OPERATORS LICENSE (if job requires a specific license) <input type="checkbox"/> YES <input type="checkbox"/> NO		DRIVERS LICENSE TYPE & NUMBER	STATE	EXPIRATION DATE	DRIVING RECORD (please select one) <input type="checkbox"/> EXCELLENT <input type="checkbox"/> GOOD <input type="checkbox"/> POOR
EMPLOYMENT DESIRED			DATE AVAILBLE	SALARY DESIRED	
POSITION DESIRED OR AREA OF INTEREST			HAVE YOU EVER APPLIED WITH GPS BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, POSITION APPLIED FOR AND DATE APPLIED) : _____		
HAVE YOU EVER BEEN EMPLOYED BY GPS BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PROVIDE DATES OF EMPLOYMENT) _____			NAMES OF RELATIVES OR FRIENDS EMPLOYED AT GPS? (IF NONE PLEASE STATE "NONE"):		
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING WITH OR WITHOUT REASONABLE ACCOMMODATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO (Any offer of employment is contingent upon passing the requisite job related mental and physical examinations, and drug/alcohol tests)					
ARE YOU ABLE TO WORK OVERTIME? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF CURRENTLY EMPLOYED, MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
ADDITIONAL COMMENTS AND/OR INFORMATION YOU WOULD LIKE TO PROVIDE:					
EDUCATION/U.S. MILITARY SERVICE			PLEASE INDICATE ANY LANGUAGES, OTHER THAN ENGLISH (IF APPLICABLE TO POSITION APPLYING FOR): <input type="checkbox"/> SPEAK <input type="checkbox"/> READ <input type="checkbox"/> WRITE _____		
SCHOOL	NAME & LOCATION OF SCHOOL	MAJOR	UNITS COMPLETED & GRADE AVERAGE	DIPLOMA AND/OR DEGREE	
HIGH SHOOOL					
TECHNICAL SCHOOL					
COLLEGE					
COLLEGE					
OTHER					
PROFESSIONAL CERTIFICATES OR LICENSES HELD:			ARE YOU CURRENTLY ENROLLED IN ANY EDUCATIONAL COURSE(S)?		
HAVE YOU EVER SERVED IN THE U.S. ARMED SERVICES?			IF YES, PROVIDE A DESCRIPTION OF MILITARY DUTIES & TRAINING		
PLEASE LIST JOB RELATED ORGANIZATIONS, CLUBS, PROFESSIONAL SOCIETIES, OR OTHER ASSOCIATIONS TO WHICH YOU BELONG. (YOU MAY OMIT THOSE WHICH INDICATE YOUR RACE, RELIGIOUS CREED, COLOR, NATIONAL ORIGIN, ANCESTRY, SEX OR AGE)					

REFERENCES		PLEASE LIST THREE PROFESSIONAL OR OCCUPATIONAL REFERENCES WHO ARE QUALIFIED TO EVALUATE YOUR JOB RELATED ATTRIBUTES & CAPABILITIES (DO NOT USE RELATIVES OR PERSONAL FRIENDS)			
NAME AND ADDRESS		OCCUPATION	TELEPHONE NUMBER(S)	YEARS KNOWN	
1.					
2.					
3.					

EMERGENCY & ALTERNATE CONTACT INFORMATION (IN CASE OF EMERGENCY, NOTIFY):

NAME :		TELEPHONE NUMBER(S):			
		PRIMARY:	SECONDARY:		
ADDRESS (PLEASE PROVIDE BOTH A PHYSICAL AND MAILING ADDRESS IF THEY ARE NOT THE SAME):			CITY :	STATE :	ZIP CODE:



Employment application - continued

EMPLOYMENT HISTORY	PLEASE PROVIDE A COMPLETE EMPLOYMENT HISTORY FOR THE PAST TEN-10 YEARS. LIST YOUR MOST RECENT EMPLOYMENT FIRST. PROVIDE EXPLANATION FOR ALL PERIODS INCLUDING FULL-TIME, PART-TIME, SUMMER-HIRE, SELF-EMPLOYED, ATTENDING SCHOOL, OR UNEMPLOYED.				
NAME OF EMPLOYER OR SCHOOL AND ADDRESS:	POSITION(S) HELD:	DATES EMPLOYED		DESCRIPTION OF DUTIES	REASON FOR LEAVING
		START:	END:		
TYPE OF BUSINESS:	TELEPHONE NUMBER:	NAME OF SUPERVISOR:			
NAME OF EMPLOYER OR SCHOOL AND ADDRESS:	POSITION(S) HELD:	DATES EMPLOYED		DESCRIPTION OF DUTIES	REASON FOR LEAVING
		START:	END:		
TYPE OF BUSINESS:	TELEPHONE NUMBER::	NAME OF SUPERVISOR:			
NAME OF EMPLOYER OR SCHOOL AND ADDRESS:	POSITION(S) HELD:	DATES EMPLOYED		DESCRIPTION OF DUTIES	REASON FOR LEAVING
		START:	END:		
TYPE OF BUSINESS:	TELEPHONE NUMBER:	NAME OF SUPERVISOR:			
NAME OF EMPLOYER OR SCHOOL AND ADDRESS:	POSITION(S) HELD:	DATES EMPLOYED		DESCRIPTION OF DUTIES	REASON FOR LEAVING
		START:	END:		
TYPE OF BUSINESS:	TELEPHONE NUMBER:	NAME OF SUPERVISOR:			
NAME OF EMPLOYER OR SCHOOL AND ADDRESS:	POSITION(S) HELD:	DATES EMPLOYED		DESCRIPTION OF DUTIES	REASON FOR LEAVING
		START:	END:		
TYPE OF BUSINESS:	TELEPHONE NUMBER:	NAME OF SUPERVISOR:			

APPLICANT ACKNOWLEDGEMENT

1. I authorize all corporations, companies, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, military services and persons to release information they may have about me to General Production Service which this form has been filed, or their authorized agent, and release all parties involved from any liability and responsibility for doing so, I also authorize the procurement of an investigative consumer report and understand that it may contain information about my background, mode of living, character and personal reputation. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested. Further, information may be available upon written request within a reasonable period of time.
 Check this box if you choose to waive your right to receive a copy of any public record obtained pursuant to California Civil Code section 1786.53. "Public records" means records documenting an arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment.
2. I understand that if considered for employment by General Production Service, I may be required to submit to a post-offer physical and drug/alcohol testing (all of which will be paid for by General Production Service). Further, I authorize the release of the physical examination and test results to General Production Service. Applicants whose test results are positive (prohibited substances present) will not be eligible for further employment consideration for a period of one-year following the report of test results.
3. Any acceptance of employment will be predicated upon the truthfulness of the written and verbal statements contained within this Application and the pre-employment process. I understand that should my General Production Service find that any statement I have made to be untruthful, any offer of employment extended to me may be withdrawn and, if employed, I may be subject to termination.
4. I understand this Application for Employment is not to be confused as a guarantee of employment for a specific time. I further understand that my employment with General Production Service does not constitute any form of contract, implied or expressed, and such employment will be terminable at will either by myself or by General Production Service upon notice of one party to the other. My continued employment is dependent on satisfactory performance and the continued need for my services as determined by General Production Service.
5. I grant General Production Service, after my termination of employment to release information, which it may deem appropriate regarding my employment with regards to my termination from General Production Service, to anyone who has a reasonable basis for making such inquiry. So long as the information disclosed is not known by General Production Service to be inaccurate, General Production Service shall not incur legal liability of any nature in connection with furnishing information to anyone with a reasonable basis for inquiring about my employment or termination.
6. I understand that my Application for Employment will be placed in an active status for a period of six months during which time it will be reviewed as position openings occur in my areas of interest or position. Additionally, I understand that should I wish to continue being considered for position openings beyond the six-month period, I must reapply by (a) submitting a new Application for Employment or by (b) submitting a letter requesting renewal of my Application and including an update of my qualifications (recent work history, educational achievements, etc.).

I acknowledge that I have read all of the above statements and that I understand them:

APPLICANT SIGNATURE: _____

DATE: _____