



435 Hecker Street
-Belleville, IL 62221-----618-277-8636

APPLICATION FOR EMPLOYMENT

Email applications to chadg@geroldmoving.com Page 1

MUST PROVIDE VALID ID or DRIVER License and SOCIAL SECURITY CARD

Position applying for _____ Application Date: _____

___ Helper ___ Packer ___ Loader ___ Driver CDL A, B, C, (E,C) ___ Whse ___ OTHER _____

Applicant Information

Last Name _____ First _____ Middle _____

Address _____ Apt _____

City _____ State _____ ZIP _____

Email address _____ SOC SEC No. _____

Phone Number: _____ Alternate Phone _____

**Emergency Contact Name _____ Phone _____ Relationship _____

Have you ever worked for GEROLD Moving & Storage-- before? _____ Yes _____ No

About when _____

How were you referred to us?

Employee referral – full name of employee who referred you: _____

GENERAL INFORMATION

Have you ever been convicted of a Felony ? _____ YES _____ NO

IF Yes Explain Date –For What - When Status- Class _____

Are you available to work weekends? ☐ Yes ☐ No

Are you available to work overtime. ☐ Yes ☐ No

MON ☐ TUES ☐ WED ☐ THUR ☐ FRI ☐ SAT ☐ SUN ☐

**If your application receives favorable consideration,
what salary/hourly rate would you expect to receive? \$ _____ Per _____**

EXPLAIN IF NEEDED _____

Signature _____ Date: _____

Position I am looking for ☐ Full-time ☐ Part-time ☐ As needed ☐ Summer only

COMMENTS: OTHER _____

If offered a position,
I would be able to start: ☐ ASAP ☐ After 1 week ☐ After 2 weeks ☐ Other _____

Employment References

Please list the name, email address and phone number of three work related references who have specific knowledge of your skills, qualifications, and abilities to perform the position you are applying for. If you have no work history, please list instructors or other individuals who can vouch for your character. Please do not list family members.

Name	Email and daytime phone number	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education

Name and location	Last year complete	Did you graduate?	Course of study
High school (GED)	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
____ College 1			
____ Tech/Vocational	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
____ College			
____ Tech/Vocational			
____ Graduate school	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment History (list CURRENT or MOST RECENT first)

attach additional sheet if necessary **Resumes may be attached but does not replace information requested**

Last Job Business name:	Business phone number (required)	Ending salary
		\$ per
Employment dates:	Address of business:	Last Position held:
From _____ TO _____		
Currently Employed ___ Yes ___ NO		Supervisor name
Job Duties: _____		
Reason for leaving: _____		May we contact ___Y ___N

2 Business name:	Business phone number (required)	Ending salary
		\$ per
Employment dates:	Address of business:	Last Position held:
From _____ TO _____		
Currently Employed ___ Yes ___ NO		Supervisor name
Job Duties: _____		
Reason for leaving: _____		May we contact ___Y ___N

3 Business name:	Business phone number (required)	Ending salary
		\$ per
Employment dates:	Address of business:	Last Position held:
From _____ TO _____		
Currently Employed ___ Yes ___ NO		Supervisor name
Job Duties: _____		
Reason for leaving: _____		May we contact ___Y ___N

4 Business name:	Business phone number (required)	Ending salary	
		\$	per
Employment dates:	Address of business:	Last Position held:	Supervisor name
From _____ TO _____	_____	_____	_____
Currently Employed ___ Yes ___ NO			
Job Duties: _____			
Reason for leaving: _____		May we contact ___Y___N	

5 Business name:	Business phone number (required)	Ending salary	
		\$	per
Employment dates:	Address of business:	Last Position held:	Supervisor name
From _____ TO _____	_____	_____	_____
Currently Employed ___ Yes ___ NO			
Job Duties: _____			
Reason for leaving: _____		May we contact ___Y___N	

6 Business name:	Business phone number (required)	Ending salary	
		\$	per
Employment dates:	Address of business:	Last Position held:	Supervisor name
From _____ TO _____	_____	_____	_____
Currently Employed ___ Yes ___ NO			
Job Duties: _____			
Reason for leaving: _____		May we contact ___Y___N	

Legal information

Please read carefully before answering:

The Civil Rights Act of 1964 and other federal laws prohibit discrimination in employment because of race, color, creed, religion, sex, national origin, age, citizenship, disability, veteran status, sexual orientation, or familial status. The following information is needed for the position for which you are applying for a legally permissible reason, including but not limited to security requirements, affirmative action, a bona fide occupational qualification, or business necessity

Are you age 18 or older? ----- ☐ Yes ☐ No

Employment is subject to verification of minimum legal age.

Are you legally entitled to work in the United States? ----- ☐ Yes ☐ No

Based on the job description or posted requirements,

Are you able to perform the duties of the position you are applying for? ----- ☐ Yes ☐ No

Do you have a current driver's license? ----- ☐ Yes ☐ No

Type---- Class A B C D E "Circle one "

Endorsments _____

Do you have a clear driving record? ----- ☐ Yes ☐ No

Do you have a vehicle (if required for position)----- ☐ Yes ☐ No

Are you able to pass a criminal background check? ----- ☐ Yes ☐ No

Special Skills and Training

Do you have any special licenses, certification, training, experience, or skills that are relevant to the position that you are applying for?

Please list and provide details, dates, and current status: _____

Technical applicants: please indicate skill areas: ☐ Mechanics ☐ Electronics ☐ Optics ☐ Other _____

List all machines or equipment that you are qualified to repair. _____

Pre-Employment Statement Authorization (please read and sign where indicated)

I (Print Name) _____ understand and agree that:

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or other materials, or during any interviews, can be justification for refusal to consider my application further, or, if employed, termination from employment.

2. Any offer of employment I may receive is contingent upon my successful completion of the company's total pre-employment screening process, including the company's receiving references that it considers satisfactory, and my satisfactory completion of a physical examination that the company may require.

3. I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening as set forth in the company's substance abuse policy.

4. In processing my application for employment, the company may verify all the information provided by me, or may procure or have prepared a consumer or an investigative consumer report for this purpose concerning my prior employment, military record, education, character, general reputation, personal characteristics, criminal record, and mode of living. I understand that upon written request to the company, I will be informed of whether an investigative consumer report was requested and will be given full information as to the nature and scope of this investigation.

5. I authorize and request that all of my present and former employers furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities and other qualities pertinent to my qualifications for employment, and hereby release them from any and all liability for damages arising from furnishing the requested information.

Signature _____ Date _____

Background authorization as above

6. In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of the company and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either the company or myself. I further understand that no manager or representative of the company, other than a President or a Vice President, has any authority to enter into any agreement with me for employment for any specified period or time or to make any agreement different from or contrary to the foregoing, unless that designee has been appointed in writing by the President or Vice President. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by one of the individuals designated above.

Signature _____ Date _____

Affirmative Action/Equal Opportunity Employer

AFFIRMATIVE ACTION VOLUNTARY INFORMATION

To comply with requirements regarding record keeping, reporting and other legal obligations which may apply, we request that you complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY** and failure to provide it will not subject you to any adverse personnel decision or action.

This form will be separated from any application materials upon receipt and the information therein will be used and kept confidential in accordance with applicable laws and regulations. The survey is not to be used for interview purposes, is not considered part of your official application, and will not be used in any hiring decision.

We consider all applications for all positions without regard to race, color, religion, sex, national origin, sexual orientation, age, familial status, veteran status, or other similarly protected status.

Your cooperation is appreciated.

Applicant information (please print):

Name: _____

Address: _____

City _____ State _____ Zip _____

=====

Date applied: _____

Position applied for: ☐ Mover/helper ☐ Driver ☐ Warehouse ☐ Mechanic
 ☐ Management ☐ Office/clerical ☐ Sales ☐ Other

Check one: ☐ Full-time ☐ Part-time

Gender: ☐ Male ☐ Female

Veteran: ☐ Yes ☐ No

Disabled: ☐ Yes ☐ No

Please check ONE of the following Equal Employment Opportunity Identification

☐ White (not of Hispanic/Latino Origin) ☐ American Indian/Alaskan Native

☐ Black (not of Hispanic/Latino Origin) ☐ Hawaiian or Pacific Islander

☐ Hispanic or Latino ☐ Asian

☐ Two or more of the above races