



GOODWILL INDUSTRIES OF NORTHEASTERN PA
925 PROSPECT AVENUE, SCRANTON, PA 18505
Phone: (570) 343-1166 | Fax: (570) 343-6765
Residential: (570) 706-9586 | Fax: (570) 706-9587
www.goodwillnepa.org

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

Position applying for: _____ Date of Application: _____

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Telephone: _____ Email Address: _____

Alternate Phone Number: _____ Social Security Number: _____

What date are you available to start? _____

Please indicate days/times you are available for work:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start							
End							

Are you able to work: _____ Full-Time _____ Part-Time _____ Overtime

Have you ever been employed by Goodwill? If yes, give dates/location: _____

Do you have any relatives currently employed by Goodwill? If yes, give name(s): _____

How did you hear about Goodwill? (check all that apply):

_____ Friend/Family Member: _____ Goodwill Employee _____

_____ Job Coach: _____ Online Job Board _____

_____ Other (please specify): _____

Are you able to lift a minimum of _____ 25 lbs? _____ 50 lbs? _____ 75 lbs? _____ 100 lbs?

Do you believe you will have any difficulty performing regular job duties as assigned? _____ Yes _____ No

If yes, please explain: _____

Have you ever been convicted of a crime? _____ Yes _____ No

(A conviction will not necessarily disqualify you from the job for which you have applied)

If yes, please explain (attach additional sheets if needed) _____

EDUCATION

SCHOOL NAME	SCHOOL ADDRESS	LEVEL	DID YOU GRADUATE
High School/GED			YES NO
College/University			YES NO
Graduate/Professional			YES NO
Other			YES NO

EMPLOYMENT HISTORY
(attach additional sheets if needed)

EMPLOYER:	FROM:
	TO:
ADDRESS:	POSITION:
SUPERVISOR:	SALARY:
REASON FOR LEAVING:	PHONE:

EMPLOYER:	FROM:
	TO:
ADDRESS:	POSITION:
SUPERVISOR:	SALARY:
REASON FOR LEAVING:	PHONE:

EMPLOYER:	FROM:
	TO:
ADDRESS:	POSITION:
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The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. Employees of Goodwill are "at will." The above employers may be contacted unless the applicant specifically states otherwise. Other references may be requested at a later date.

I release from liability any past or present employer, law enforcement agency, physician or hospital, or any school for providing information to Goodwill Industries of NEPA. My signature indicates that I have read and understand the above statements as persisted.

Signature _____ Date _____

Release and Authorization

I _____ in conjunction with my application with Goodwill Industries of NEPA authorize Goodwill to conduct reference checks from former employers. I authorize and release companies, current and former employers to provide all information requested by Goodwill. I further release all of the above including Goodwill to the extent permitted by law, from any liability or claims arising from retrieving and reporting information concerning me. I agree that a copy or fax of this document shall be as valid as the original.

Signature _____ Date _____

REFERENCE CHECK

APPLICANT'S NAME _____

<p>Name of Reference: _____</p> <p>Phone Number: _____</p> <p>Relationship: _____</p> <p>Number of Years Known: _____</p> <p>Would you hire/eligible for rehire?</p> <p>Do you know of any reason not to hire?</p>	<p><u>COMMENTS:</u> <i>(office use only)</i></p>
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**EQUAL EMPLOYMENT OPPORTUNITY (EEO)
VOLUNTARY SELF-IDENTIFICATION FORM**

Qualified applicants are considered for employment without regard to race, religion, sex, national origin, age, marital status, sexual orientation, veteran status, disability, or other protected characteristic.

The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

This detachable form will be kept on a confidential file separate from your application for employment.

Name: _____

Address: _____

Position Applied For: _____ Date Applied: _____

Gender Identification (check one) _____ Female _____ Male

Race/Ethnic Identification (check one)

_____ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

If you did not check “Hispanic or Latino” above, please select one of the following race/ethnic identifications.

_____ **White (Not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_____ **Black or African American (Not Hispanic or Latino)** – A person having origins in any of the racial group of Africa.

_____ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

_____ **Asian (Not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

_____ **American Indian or Alaska Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

_____ **Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

_____ Decline self-identification.

Applicant’s Signature

Date