



Employee #

APPLICATION FOR EMPLOYMENT

The Gilbert Skybox is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, national origin, the presence of mental, physical, or sensory disability, sexual orientation, or any other basis prohibited by federal, state, or provincial law.

PERSONAL INFORMATION

Name (Last, First, Middle)		Social Security #	Date
Address		City	St. Zip
Home Phone	Cell Phone	E-mail	
Are you legally authorized to work in the United States? Yes _____ No _____ (All new hires will be required to provide proof of eligibility to work in the U.S.)			
Have you been convicted of a crime in the last seven (7) years? Yes _____ No _____ If Yes, list convictions that are a matter of public record (arrests are not convictions). A conviction will not necessarily disqualify you for employment.			

EMPLOYMENT DESIRED

Position	Desired Wage	Date You Can Start				
Specify hours available for each day of the week and or am/pm shifts						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Have you ever worked for The Gilbert Skybox in the past? Yes _____ No _____ If yes, when? _____						

EDUCATION / TRAINING - Include Technical / Academic Achievements/Courses

Have you obtained a high school diploma or GED certificate? Yes _____ No _____			
School	Name & Location	Diploma/Degree	Subject Of Specialization
College/ University			
Specialized Courses & Training			

MILITARY - Branch of Service:

Describe any military training received relevant to the position for which you are applying:

EMPLOYMENT HISTORY - Begin with Most Recent Employment

Dates From	To	Company Name	City/State
Titles and Duties -			
Reason for Leaving:		Supervisor's Name	Phone
Dates From	To	Company Name	City/State
Titles and Duties -			
Reason for Leaving:		Supervisor's Name	Phone
Dates From	To	Company Name	City/State
Titles and Duties -			
Reason for Leaving:		Supervisor's Name	Phone

REFERENCES - Give the Names of Three Persons Not Related to You

Names	Address	Phone	Occupation

The information on this application is true and accurate to the best of my knowledge.

Signature _____ Date _____

FOR OFFICE USE ONLY:		
Interview Yes ___ No ___	Date: _____	
Remarks: _____		

Start Date: _____	Position: _____	Shirt Size: _____
Approved by: _____		