



Contact info: 540-686-0091  
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## 2019 EMPLOYMENT APPLICATION & CONSENT FORM

TODAYS DATE: \_\_\_\_\_ (Month, Date & Year)

Employment at Vanguard LGSB is contingent on participation in a drug & alcohol screen. Are you willing to submit to a drug & alcohol screen? YES OR NO (CIRCLE) If the answer is no, please fill out the application in case you return in the future willing to participate in a drug screen.

POSITION(S) APPLYING FOR \_\_\_\_\_

WAGE/SALARY EXPECTED \$ \_\_\_\_\_ DATE AVAILABLE TO START \_\_\_\_\_ (Month & Date)

HAVE YOU EVER WORKED WITH OUR COMPANY BEFORE? YES OR NO (CIRCLE) IF YES, LIST DATES \_\_\_\_\_

DO YOU HAVE ANY OBLIGATIONS IN THE NEXT 90 DAYS THAT WILL REQUIRE YOU NOT TO BE AVAILABLE TO WORK, IF HIRED, SUCH AS UPCOMING COURT DATES, PREVIOUSLY COMMITTED FAMILY EVENTS, DOCTOR'S APPOINTMENTS, ETC? YES OR NO (CIRCLE) IF YES PLEASE LIST ALL DATES:

\_\_\_\_\_

*\*IF A POSITION OF EMPLOYMENT IS OFFERED TO ME, I UNDERSTAND THAT THERE IS A 90-DAY PROBATION PERIOD WHERE ATTENDANCE IS MANDATORY; UNEXCUSED ABSENCES NOT LISTED ABOVE ARE GROUNDS FOR IMMEDIATE TERMINATION.*

### PERSONAL INFORMATION

NAME (LAST / FIRST / MIDDLE) \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ (Month, Date & Year)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ YEARS AT THIS ADDRESS: \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ SECONDARY TELEPHONE # \_\_\_\_\_

WHAT IS YOUR MOTHER'S MAIDEN NAME? \_\_\_\_\_

DO YOU HAVE A VALID DRIVERS LICENSE? YES OR NO (CIRCLE) STATE \_\_\_\_\_ LIC.

NUMBER \_\_\_\_\_

DO YOU OWN YOUR OWN VEHICLE: YES OR NO (CIRCLE)

DO YOU HAVE RELIABLE TRANSPORTATION BY ANOTHER PERSON? YES OR NO (CIRCLE)

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.? YES OR NO (CIRCLE)

ARE YOU AT LEAST 18 YEARS OF AGE? YES OR NO (CIRCLE)

### EDUCATION

ELEMENTARY SCHOOL HIGH SCHOOL: 9 10 11 12 COLLEGE: 1 2 3 4 (Indicate last year completed, Circle)

NAME AND ADDRESS OF LAST SCHOOL ATTENDED: \_\_\_\_\_

DEGREES \_\_\_\_\_

SPECIAL COURSES / TRAINING OR CERTIFICATIONS \_\_\_\_\_

**MILITARY SERVICE RECORD:**

BRANCH \_\_\_\_\_ DISCHARGED \_\_\_\_\_

BRANCH \_\_\_\_\_ DISCHARGED \_\_\_\_\_

TYPE OF DISCHARGE \_\_\_\_\_ RANK \_\_\_\_\_ SERIAL # \_\_\_\_\_

**ADDITIONAL INFORMATION:**

HOW DID YOU COME TO APPLY (Please Check)

NEWSPAPER \_\_\_ WALK-IN \_\_\_ HIGH SCHOOL RECRUIT \_\_\_ COLLEGE RECRUIT \_\_\_ OTHER \_\_\_\_\_

EMPLOYEE REFERRAL \_\_\_\_\_ NAME OF VANGUARD EMPLOYEE? \_\_\_\_\_

HAVE YOU EVER BEEN BONDED? YES OR NO (CIRCLE) HAVE YOU EVER BEEN REFUSED BOND? YES OR NO (CIRCLE)

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES OR NO (CIRCLE)

IF YES, DATES, OFFENSE, COURT AND PLACE WHERE OFFENSE(S) OCCURRED:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

HAVE YOU EVER BEEN DISCHARGED OR REQUESTED TO RESIGN FROM A POSITION? YES OR NO (CIRCLE)

IF YES, PLEASE EXPLAIN \_\_\_\_\_

HAVE YOU EVER HELD A POSITION OF TRUST? (Explain, Example: handling money or confidential material)

\_\_\_\_\_

ARE YOU CURRENTLY EMPLOYED? YES OR NO (CIRCLE) NAME OF EMPLOYER: \_\_\_\_\_

POSITION: \_\_\_\_\_ # OF YEARS: \_\_\_\_\_ CURRENT WAGE: \$ \_\_\_\_\_ START WAGE: \$ \_\_\_\_\_

DOES YOUR PRESENT EMPLOYER KNOW YOU PLAN TO CHANGE EMPLOYMENT? YES OR NO (CIRCLE)

WHY DO YOU DESIRE TO MAKE A CHANGE? \_\_\_\_\_

ARE YOU WILLING AND ABLE TO WORK OVERTIME? YES OR NO (CIRCLE)

ARE THERE ANY TIMES AND/OR DAYS THAT YOU CANNOT WORK? \_\_\_\_\_

*PLEASE NOTE THAT OVERTIME AND/OR WEEKEND WORK MAY BE REQUIRED AND IS EXPECTED SHOULD PRODUCTION NOT MEET PRODUCTION SCHEDULE.*

\_\_\_\_\_

DO YOU HAVE ANY CONDITIONS WHICH WOULD REQUIRE JOB ACCOMODATIONS?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**PLEASE LIST (3) REFERENCES** (Do not include relatives or former employees)

NAME #1 \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

ADDRESS \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ BUSINESS/INDUSTRY \_\_\_\_\_

NAME #2 \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

ADDRESS \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ BUSINESS/INDUSTRY \_\_\_\_\_

NAME #3 \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

ADDRESS \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ BUSINESS/INDUSTRY \_\_\_\_\_

