



APPLICATION FOR EMPLOYMENT

The quality of our service depends highly on having a capable, competent and truly caring staff to provide superior service to our clientele. We consider our search for new employees to be a most important one and this application is a first step in that process. Please complete it to the best of your ability. We look forward to learning more about you.

Gentle Transitions is an equal opportunity employer. We comply with all federal, state and local laws regarding employment practices. All requested information on this employment application is designed to be job related. Our employment policies are non-discriminatory.

PERSONAL DATA

| | | | | | |
|---|--|---|------|---|-------------------|
| Last name | | First Name | | Middle Name/Initial | |
| Address | | Apt. No. | City | | State Zip Code |
| Home Telephone | | Cell Phone | | Other Number | |
| May we contact you at work: <input type="checkbox"/> Yes <input type="checkbox"/> No | | Social Security Number _____ - _____ - _____ | | *Are you legally permitted to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| *If you are hired to work for <i>Gentle Transitions</i> , you will be required to furnish documentation within three (3) working days that you are legally entitled to work in the United States. | | | | | |
| Email address: | | | | | |
| How often do you check your email? | | | | | |
| <input type="checkbox"/> Don't have | | <input type="checkbox"/> Rarely | | <input type="checkbox"/> Every few days | |
| | | | | <input type="checkbox"/> Daily | |
| | | | | <input type="checkbox"/> Several times a day | |

DESIRED POSITION

| | | | | |
|--|--|--|----------------|--|
| Position applying for: <input type="checkbox"/> Moving Assistant <input type="checkbox"/> Move Manager <input type="checkbox"/> Sales/Marketing <input type="checkbox"/> Office <input type="checkbox"/> Other _____ | | <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary | Date Available | Are there specific times when you are unavailable? |
| How did you become aware of <i>Gentle Transitions</i> ? | | | | |
| Please list names of friends or family, if any, employed by <i>Gentle Transitions</i> . | | | | |
| Although we are not a moving company, our field work (working on moves) is without a doubt physically taxing. Do you have any physical limitations that would require reasonable accommodation to perform the job for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain | | | | |
| Do you have reliable personal transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |



RECORD OF PREVIOUS EMPLOYMENT

Please complete for your last three(3) positions beginning with your most recent. Please also provide your resume, if available.

| | | | |
|--|--------------------|----------|--------------------|
| Name of Present/Last employer | | | |
| Address | City | State | Zip |
| Telephone Number | Supervisor's Name | | Supervisor's Title |
| Your Job Title | Start Date | End date | |
| Rate of Pay _____ / _____ Starting Ending | Reason for Leaving | | |
| Major Responsibilities | | | |
| | | | |

May we contact the above employer? Yes No

| | | | |
|--|--------------------|----------|--------------------|
| Name of Present/Last employer | | | |
| Address | City | State | Zip |
| Telephone Number | Supervisor's Name | | Supervisor's Title |
| Your Job Title | Start Date | End date | |
| Rate of Pay _____ / _____ Starting Ending | Reason for Leaving | | |
| Major Responsibilities | | | |
| | | | |

May we contact the above employer? Yes No

| | | | |
|--|--------------------|----------|--------------------|
| Name of Present/Last employer | | | |
| Address | City | State | Zip |
| Telephone Number | Supervisor's Name | | Supervisor's Title |
| Your Job Title | Start Date | End date | |
| Rate of Pay _____ / _____ Starting Ending | Reason for Leaving | | |
| Major Responsibilities | | | |
| | | | |

May we contact the above employer? Yes No



ADDITIONAL INFORMATION

| | | |
|---|----------------|-----------------|
| Do you have a valid California Drivers License? <input type="checkbox"/> Yes <input type="checkbox"/> No | License Number | Expiration Date |
| *Except for the offense of minor traffic violations or possession of less than an ounce of marijuana for your personal use, have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If yes, please state the circumstances and the crime for which you were convicted. | | |
| Do you have a trial pending for a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

***Conviction is not an automatic bar to employment. All circumstances will be considered.**

| |
|--|
| Are you presently taking any illegal drugs or drugs which have not been prescribed by a doctor? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain |
|--|

EDUCATION

| Name of School | City/State | Graduated | Degree/Certificate/Diploma |
|--------------------|------------|-----------|----------------------------|
| High School | | | |
| College/University | | | |
| College/University | | | |
| Vocational School | | | |
| Other | | | |

SKILLS/EXPERIENCE

Which of the below software programs are you competent in:

| | | | |
|---------------------------------|--|--|--------------------------------|
| <input type="checkbox"/> Word | <input type="checkbox"/> PowerPoint | <input type="checkbox"/> Access | <input type="checkbox"/> Other |
| <input type="checkbox"/> Excel | <input type="checkbox"/> Publisher | <input type="checkbox"/> QuickBooks | _____ |
| Other skills or certifications: | Are you certified in CPR? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you certified in First Aid? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

LANGUAGES

| | | | | | | |
|---------|--------------------------------|-------------------------------|--------------------------------|--------------------------------|-------------------------------|--------------------------------|
| English | <input type="checkbox"/> Speak | <input type="checkbox"/> Read | <input type="checkbox"/> Write | <input type="checkbox"/> Speak | <input type="checkbox"/> Read | <input type="checkbox"/> Write |
| | <input type="checkbox"/> Speak | <input type="checkbox"/> Read | <input type="checkbox"/> Write | <input type="checkbox"/> Speak | <input type="checkbox"/> Read | <input type="checkbox"/> Write |

PROFESSIONAL REFERENCES

| Name | Telephone | Relationship |
|------|-----------|--------------|
| | | |
| | | |
| | | |



APPLICANT'S STATEMENT AND AGREEMENT

Please read the following statements carefully before signing.

*I certify that the answers given by me to the foregoing questions and statements are true and correct without omissions. I agree that **Gentle Transitions** shall not be liable if my employment is terminated because of any misrepresentation, falsification of statements, answers or omissions, made by me on this application, any accompanying resume or supplementary materials and can be cause for refusal to hire or for immediate dismissal from employment at any time during the period of my employment.*

Permission is hereby granted to obtain verification of the statements made herein and to obtain references as approved by me. I authorize the references listed herein and approved by me, to release any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing and utilization of such information.

*As a condition of employment, I agree that all information which I receive or have access to, as a result of my employment, which relates in any manner to the business activities, programs, concepts, designs or processes of **Gentle Transitions** are to be treated by me as restrictive and *trade secret information* and are to be kept in confidence, and are not to be disclosed to any unauthorized person, firm or enterprise during or after my employment, or used by me in any manner outside the scope of my employment without limitation.*

*I understand that **Gentle Transitions** may investigate my driving record as it relates to the specific job for which I am applying. Furthermore, I understand that I may be required to pass both a drug test and a criminal background check in order for any offer of employment to be valid.*

*I understand that completion of this application does not assure me of a position with **Gentle Transitions**. My *employment and compensation is for no definite period of time and is terminable at-will*, which means that either **Gentle Transitions** or I may terminate the employment relationship at any time, for any reason whatsoever, with or without good cause at the option of either **Gentle Transitions** or myself. This is the entire agreement between **Gentle Transitions** and me concerning the term of employment, and supersedes any prior agreements that may have been made. The agreement may not be modified except by a written document signed by the President of **Gentle Transitions**.*

If you have any questions regarding this statement page, please ask Human Resources before signing.

I hereby acknowledge that I have read the above statements and understand the same.

Signature: _____

Date: _____

We appreciate your interest in considering employment with *Gentle Transitions*.