

(Send to [jobs@gejohnson.com](mailto:jobs@gejohnson.com). Please include resume.)

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Email Address

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Today's Date (Applications for hourly positions are active for 90 days.)**APPLICATION FOR EMPLOYMENT**

GE Johnson is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on the basis of race, color, gender, sexual orientation, marital status, religion, creed, age, national origin, citizenship status, worker's compensation status, physical or mental disability, veteran status or any other status protected under applicable local, state or federal non-discrimination law. It is our intention that all applicants be given equal opportunity and that selection decisions are based on job-related factors. Any person needing reasonable accommodation in the application process should contact Human Resources at 719-473-5321.

**PERSONAL INFORMATION**

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Last Name

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M.I.

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First Name

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Home Phone

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Street Address

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City

---

State

---

Zip

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Cell Number**GENERAL INFORMATION****Position(s) Desired**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Can you, upon employment, submit proof that you are 18 years of age or older?

Yes      No

List the cities and/or states that you are available to work:

\_\_\_\_\_

**Date Available to Work**

List other names under which you worked or attended school. (Include maiden name.)

\_\_\_\_\_

\_\_\_\_\_

Can you, upon employment, submit verification of your legal right to work in the United States, and provide documentation verifying your identity?

Yes      No

**How were you referred to us?**

Ad	School	Self
Agency	Other	Employee

If Employee, please provide name:

Have you applied for work or worked for the Company before?

Yes      No

If yes, when?

\_\_\_\_\_

\_\_\_\_\_

Is there any reason why you would not be able to perform the essential duties of the position you are applying for?

Yes      No      If yes, please explain: \_\_\_\_\_

Have you ever been disciplined or fired for violent behavior, harassment, fund management, or theft?

Yes      No      If yes, please explain: \_\_\_\_\_

**DRIVING INFORMATION**

Driver's License \_\_\_\_\_ Exp Date \_\_\_\_\_ Special License \_\_\_\_\_ Exp Date \_\_\_\_\_

Have you ever had your driver's license suspended or revoked?      Yes      No      Class \_\_\_\_\_

Have you ever been charged with driving under the influence of alcohol or drugs?      Yes      No

Please explain your answers: \_\_\_\_\_

**EDUCATION**

	Name and Location of School	Diploma or Degree			Degree and Major
High School		Graduated?	Yes	No	
College		Graduated?	Yes	No	
Graduate School		Graduated?	Yes	No	
Vocational or Technical		Graduated?	Yes	No	

## EXPERIENCE

Please list all of your current and previous employers during the past 2 years in chronological order starting with the most recent. Please account for all periods of time including military serve. **Driver applicants** must list the past 10 years of employment history as an operator of a commercial motor vehicle. If more space is needed, please attach an additional sheet of paper.

**Date from (MM/YY)** \_\_\_\_\_ to \_\_\_\_\_ May we contact this employer? Yes No  
Company name \_\_\_\_\_ City & State \_\_\_\_\_  
Your title \_\_\_\_\_ Supervisor's title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_  
Work performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Date from (MM/YY)** \_\_\_\_\_ to \_\_\_\_\_ May we contact this employer? Yes No  
Company name \_\_\_\_\_ City & State \_\_\_\_\_  
Your title \_\_\_\_\_ Supervisor's title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_  
Work performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Date from (MM/YY)** \_\_\_\_\_ to \_\_\_\_\_ May we contact this employer? Yes No  
Company name \_\_\_\_\_ City & State \_\_\_\_\_  
Your title \_\_\_\_\_ Supervisor's title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_  
Work performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Date from (MM/YY)** \_\_\_\_\_ to \_\_\_\_\_ May we contact this employer? Yes No  
Company name \_\_\_\_\_ City & State \_\_\_\_\_  
Your title \_\_\_\_\_ Supervisor's title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_  
Work performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

## ADDITIONAL INFORMATION/SKILLS

(List specific skills, training, technical or professional knowledge that you may have relating to the applied for job(s).)

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## APPLICANT'S CERTIFICATION

(Please read carefully and initial each statement before signing)

I understand that if I receive a job offer, that offer is contingent upon my consent to and satisfactory completion of a drug test. I further understand that if I am employed, I must comply with the Company's substance abuse policies, which provide for drug and alcohol testing to the extent permitted by applicable laws.

(Initial)

If I am extended an offer of employment it may be conditioned upon my successfully passing a pre-employment physical examination. I authorize any medical provider conducting such an examination to release medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

(Initial)

I understand that if I receive a job offer, that offer is contingent upon my consent to and satisfactory completion of a background screening.

(Initial)

I understand that if I am hired, my employment with the Company will be at-will, meaning that either the Company or I can terminate the relationship at any time and for any reason, with or without notice. I further understand that although other terms and conditions of employment may change, this at-will employment relationship will remain in effect throughout my employment with the Company. I also understand that if I am hired, I am obligated to abide by the policies set forth by the Company.

(Initial)

I authorize the Company to verify any information related to my application in accordance with applicable laws. I also authorize individuals, schools, employers and law enforcement or government officials to release any information concerning my background, and hereby release any and all of them from any liability for doing so.

(Initial)

I hereby acknowledge that I have read and understand the above statements. I certify that I have truthfully completed this application and I have not withheld any information relative to my application. I understand that any misrepresentation or material omission on the application will result in my disqualification for consideration of employment. I further understand that, if I am hired and any misrepresentation or material omission becomes known after that time, the Company may immediately terminate my employment.

(Initial)

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

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