

GUAM COALITION AGAINST SEXUAL ASSAULT & FAMILY VIOLENCE

P.O. Box 1093 Hagåtña, Guam 96932 • Phone: (671) 479-2277 • Fax: (671) 479-7233 Info@GuamCoalition.org • www.GuamCoalition.org • www.PacificRegionResources.org

APPLICATION FOR EMPLOYMENT					
			Date:		
Name:					
	Last F	First	Middle	Maiden	
Home addres	SS:				
	Number	C	ity St	ate Zip	
Mailing addre	ess:				
		C	ity St	ate Zip	
Telephone \M	/ork ())		
	/onk (]]		
Email					
Employment	Desired	Part Time (# of hours/	week.)	
				/	
Date availab	le for work				
Type of			# of years		
school	Name of school	Location	completed	Major & Degree	
High School					
College					
Business or					
Trade school					
Professional					
school					
MILITARY					
Have you ever been in the Armed Forces?					
Are you know a member of the National Guard or Reserve?					
Specialty		Date Entered	Disc	charge Date	

Please list two references other than relatives or previous employers.				
Name	Name			
Position	Position			
Company	Company			
Address	Address			
Telephone ()	Telephone ()			
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.				

Work Experience:	Please list your work experience for the past five years beginning with your most recent job held. Attach additional sheets if necessary.					
Name of employer		Name of last supervisor	Employment dates		Pay or salary	
Address			From	То	Start	Final
Dhana muchan		Vous loot ich title				
Phone number		Your last job title				
Reason for leav	ving (be specific)					
List the jobs yo worked at this c	•	kills used or learned, advan	cements	or promo	tions wh	ile you

Name of employer	Name of last supervisor	-	oyment ites	Pay o	r salary
Address		From	То	Start	Final
Phone number	Your last job title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				ile you	

Name of employer	Name of last supervisor	•	oyment ites	Pay oi	r salary
Address		From	То	Start	Final
Phone number	Your last job title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, sl worked at this company.	kills used or learned, advand	cements	or promo	tions wh	ile you

Name of employer	Name of last supervisor	Employ dat		Pay or	salary	
Address		From	То	Start	Final	
Phone number	Your last job title					
Reason for leaving (be specific)						
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						

May we contact your present employer?	🛛 Yes 🖵 No	
Did you complete this application yourself	🗆 Yes 🗆 No	

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If not, who did?_____

PLEASE READ CAREFULLY

I authorize verification of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Guam Coalition Against Sexual Assault & Family Violence (GCASAFV) permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the GCASAFV from any liability as a result of such contract.

I understand that if selected for GCASAFV employment, I will be required to obtain and provide to GCASAFV a police and court clearance. I further understand that my employment with GCASAFV shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the GCASAFV is terminable at will for any reason by either party during the probationary period.

Signature of applicant	Date:
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GCASAFV is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity of employment with GCASAFV depends solely on your qualifications.

Thank you for completing this application form and for your interest in our organization.