



15 Industrial Parkway  
Burlington, VT 05401

Phone (802) 864-0211  
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### APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

\_\_\_\_\_ XXX-XX-  
Last Name First Middle Social Security #

\_\_\_\_\_   
Street Address City State Zip Code

\_\_\_\_\_   
Home Phone Cell Phone

Are you legally eligible for employment in the United States? \_\_\_\_\_

Position you are applying for: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

Please attach your resume and additional references, if available, to this application.

### EDUCATION

Circle the last year completed:

High School      1      2      3      4      Name of School: \_\_\_\_\_

College            1      2      3      4      Name of School: \_\_\_\_\_

Graduate School    1      2      3      4      Name of School: \_\_\_\_\_

Other Schooling: \_\_\_\_\_

Please list relevant training or courses that you have completed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PREVIOUS EMPLOYMENT

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Starting with your most recent job, please list all employers you have worked for in the last 10 years. Attach additional sheets if necessary.

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**1.** Job Title: \_\_\_\_\_  
Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_  
Company Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Supervisor Name and Phone Number: \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_  
May we contact as a reference? \_\_\_\_\_

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**2.** Job Title: \_\_\_\_\_  
Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_  
Company Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Supervisor Name and Phone Number: \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_  
May we contact as a reference? \_\_\_\_\_

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**3.** Job Title: \_\_\_\_\_  
Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_  
Company Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Supervisor Name and Phone Number: \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_  
May we contact as a reference? \_\_\_\_\_

Have you ever tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain a job during the past 2 years?

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**DRIVING RECORD**

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**A.** Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Do you have a current commercial driver's license? \_\_\_\_\_

If yes, do you have a) a passenger endorsement? \_\_\_\_\_

b) an air brake endorsement? \_\_\_\_\_

Is it legally in full force and effect? \_\_\_\_\_

**B.** Please detail your vehicular accident record for the past 3 years. Attach additional sheets if necessary.

<b>Date</b>	<b>Nature of Accident</b> (head-on, rear-end, upset, etc.)
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1. \_\_\_\_\_

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

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

**C.** Have you ever received any safe driving awards? \_\_\_\_\_

If yes, please detail dates and types of awards: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**To BE READ AND SIGNED BY APPLICANT**

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GMT encourages job applications from all qualified people, regardless of a person's criminal record; providing qualified applicants the opportunity to explain a criminal record when applying.

There are specific positions within the organization designated as safety sensitive, where a criminal conviction may cause the candidate to be deemed ineligible for hire in that position, regardless of the circumstances.

I hereby grant GMT permission to contact any references I have given, and grant such references full permission to speak truthfully and in detail about me.

I acknowledge and agree that in connection with any conditional offer of employment, I may have to submit to a medical examination, including pre-employment drug and alcohol testing by a physician assigned by GMT.

I hereby warrant that the foregoing answers are true in every particular, and I further agree to resign immediately from the employ of GMT should any one of my statements or answers on this application be found inaccurate, misleading, or incomplete.

**Failure to provide full and accurate information on this application will be grounds for immediate termination of employment.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (printed)

*GMT is committed to providing a workplace that includes people of diverse backgrounds and fully utilizes their talents to achieve its mission. GMT believes that an inclusive and diverse workplace culture enhances the performance of our organization and our ability to fulfill the agency's mission.*