



## Employment Application

GStek, Inc. is proud to be an Affirmative Action/Equal Opportunity Employer. GStek provides equal employment opportunity for all persons in all facets of employment. We maintain a drug-free workplace and perform post-offer background checks. GStek encourages veterans, disabled veterans and disabled individuals to apply for any open position for which they feel they are qualified. EOE Minority/Female/Veteran/Disabled

Applicants with disabilities may contact the GStek, Inc. Human Resources department via telephone, fax, or e-mail to request and arrange for accommodations. If you need assistance to accommodate a disability, you may request an accommodation at any time. Please contact our Human Resources department at: (757) 548-1597, (757) 436-6842 (fax), or hr@gstekinc.com.

Date Applied: \_\_\_\_\_ Position Applied For: \_\_\_\_\_  
Date Available for Employment: \_\_\_\_\_

### APPLICANT INFORMATION

LAST NAME ↓	FIRST NAME	PREFERRED NAME	MIDDLE NAME	CELLULAR PHONE NO. ( )
E-MAIL ADDRESS ↓				HOME / MESSAGE PHONE NO. ( )
PERMANENT STREET ADDRESS ↓	CITY	STATE	ZIP CODE	OTHER CONTACT NO. ( )

- Are you legally eligible for employment in the United States?  Yes  No
- Are you currently 18 years of age or older?  Yes  No
- Are you willing to accept employment which requires you to travel?  Yes  No
- Are you available to work overtime?  Yes  No
- Do you currently have a valid state driver's license?  Yes  No  
*(Note: A current report of your driving history for the past 3 years is required for most positions.)*

### RELATED EDUCATION

If applicable to the position applied for:

Can you provide a copy of the listed Degrees/Certificates?  
Yes  No

List College or University, Military School, Technical School, Trade School, Night School, Apprenticeships **applicable to the position** applied for.

NAME AND LOCATION OF INSTITUTION	FROM Month/Year	TO Month/Year	UNITS COMPLETED		MAJOR	CONCENTRATION	GPA Grade/Scale	DEGREE
			Sem.	Qtr.				

If you expect to complete an education program in the near future, please indicate what type of degree or program and expected completion date: \_\_\_\_\_

Describe position related specialized training, apprenticeships, skills, etc:  
\_\_\_\_\_  
\_\_\_\_\_

**U.S. MILITARY SERVICE**

If applicable to the position applied for:

BRANCH OF SERVICE    RANK    MILITARY OCCUPATIONAL SPECIALITY

Briefly describe your duties:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL REFERENCES**

Name people in your field (**professional**) with whom you have worked and whom we have permission to contact. Please contact your references and let them know we will be calling from area code (757). Verify contact telephone numbers.

Reference Full Name	Company name and address where you both worked	
(    )	(    )	
Contact Telephone Number	Alternate Contact Telephone Number	Contact email address if overseas

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**PREVIOUS GStek, Inc. EXPERIENCE**

Have you ever been a GStek, Inc. employee?	Where?	When?
<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

**EMPLOYMENT AND PERSONAL HISTORY**

Starting with your most recent, describe paid, military and applicable voluntary experience covering the last 7 years at a minimum. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position. **Provide an explanation for periods of unemployment.** If your past three employment periods are less than seven years, provide additional employer information on a separate sheet.

Your **present employer will be contacted** unless you tell us otherwise: (pre-offer)

Yes, you may contact my present employer.     No, you may not contact my present employer.

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Company (Present or last employed with)	Telephone Number (    )	From (Month/Year)	To (Month/Year)
Street Address	City	State	Zip Code
Position or Title	Name of Immediate Supervisor	Immediate Supervisor's Telephone Number	
Briefly Describe Your Responsibilities			
Reason For Leaving:			

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**SECURITY CLEARANCE**

Have you ever had a U.S. government Security Clearance?	Level of most recent Clearance	Date Granted	Employer at Time Granted	Clearing Agency
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Yes  No

Have you ever had a Security Clearance Denied or Revoked? Level of Clearance Date Action Taken Action Taken by Whom Employer at Time of Action

Yes  No

I certify that the answers I have given and the statements I have made in this application are true and complete, and that I have not omitted any information of consequence. I agree not to hold any GStek, Inc. liable if my employment is terminated because I have given incorrect answers or statements, or omitted important information in this application. I authorize the companies, schools, and people named in this application to give GStek, Inc. any requested information about my employment or education, and release them from liability for damages for giving this information. I understand that GStek is an 'at-will' employer that operates under the provision that employees have the right to resign their position at any time, with or without notice and with or without cause. I also understand that GStek has the right to terminate the employment relationship at any time, with or without notice and with or without cause. I understand that my ability to verify eligibility for employment in the United States is a condition of employment.

*Falsification or significant omission of information, regardless of the time of discovery, may cause forfeiture on my part of any employment in the service of GStek, Inc.*

*Please read the above statement and sign application here:*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

*If applying for employment in the state of **Maryland**, please read and acknowledge the following statement:*

"Under Maryland law, an employer may not require or demand as a condition of employment, prospective employment, or continued employment, that an individual submit to or take a lie detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100."

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**\*\* Attach your up-to-date resume to this application.**

How did you find out about this employment opportunity?

- State Employment Office
- CareerBuilder
- Indeed
- Job Bank

- GStek, Inc. Web Site
- GStek Employee Referral
- Internet Search
- Other \_\_\_\_\_

- Government Referral
- Employment Agency

GStek, Inc. is proud to be an Affirmative Action/Equal Opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability status, or any other characteristic protected by law. GStek encourages veterans, disabled veterans, and disabled individuals to apply for any open position for which they feel they are qualified. EOE Minority/Female/Veteran/Disabled



## This Organization Participates in E-Verify

## Esta Organización Participa en E-Verify



This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.

If E-Verify cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact Department of Homeland Security (DHS) or Social Security Administration (SSA) so you can begin to resolve the issue before the employer can take any action against you, including terminating your employment.

Employers can only use E-Verify once you have accepted a job offer and completed the Form I-9.

### **E-Verify Works for Everyone**

For more information on E-Verify, or if you believe that your employer has violated its E-Verify responsibilities, please contact DHS.

Este empleador participa en E-Verify y proporcionará al gobierno federal la información de su Formulario I-9 para confirmar que usted está autorizado para trabajar en los EE.UU..

Si E-Verify no puede confirmar que usted está autorizado para trabajar, este empleador está requerido a darle instrucciones por escrito y una oportunidad de contactar al Departamento de Seguridad Nacional (DHS) o a la Administración del Seguro Social (SSA) para que pueda empezar a resolver el problema antes de que el empleador pueda tomar cualquier acción en su contra, incluyendo la terminación de su empleo.

Los empleadores sólo pueden utilizar E-Verify una vez que usted haya aceptado una oferta de trabajo y completado el Formulario I-9.

### **E-Verify Funciona Para Todos.**

Para más información sobre E-Verify, o si usted cree que su empleador ha violado sus responsabilidades de E-Verify, por favor contacte a DHS.

**888-897-7781**

**[dhs.gov/e-verify](https://dhs.gov/e-verify)**



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