

Global Employment Solutions**8000 IH 10 West , Suite 600****San Antonio, TX, 78230****(210) 349-5200 phone****(210) 524-7773 fax**

DATE: _____

CNSLT: _____

Global Employment Solutions is an Equal Opportunity Employer and does not discriminate against qualified applicants or employees on account of race, color, religion, sex, age, national origin or disability. The Company prohibits harassment and discrimination in the workplace.

PERSONAL DATA

Last Name		First	Middle	Maiden	Referred to us by:	Work Phone
Address		City	State	Zip	Nearest Intersection	Home Phone
Yrs. in SA	Reason for relocating		Social Security #		Smoking <input type="checkbox"/> Y <input type="checkbox"/> N	Cellular Phone or pager
Spouse or Relative Name		Their Employer		Title	# of Yrs.	Their Work Phone
Position Applying For	Presently Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Availability <input type="checkbox"/> ASAP <input type="checkbox"/> Two Wks		Area of town you work in	Email Address

EDUCATION

Name of High School	City/ State	Yrs. Completed	Special Achievements			GPA
Name of College	City/ State	Yrs. Completed	Total Hours	Major	Degree	2nd Degree GPA
Other Education	City/ State	Yrs. Completed	What languages do you read, write or speak proficiently?			

EMPLOYMENT HISTORY*THE FOLLOWING SECTION MUST BE COMPLETED. PLEASE LIST MOST RECENT POSITION FIRST.*

Most Recent Company			Second Most Recent Company			Third Most Recent Company			Fourth Most Recent Company		
Title of Last Position			Title of Last Position			Title of Last Position			Title of Last Position		
Name of Employer			Name of Employer			Name of Employer			Name of Employer		
City of Employer		State	City of Employer		State	City of Employer		State	City of Employer		State
Type of Business	# of Empl.		Type of Business	# of Empl.		Type of Business	# of Empl.		Type of Business	# of Empl.	
Dates from	To	# of Yrs.	Dates from	To	# of Yrs.	Dates from	To	# of Yrs.	Dates from	To	# of Yrs.
Ending \$	Starting \$	Nxt Raise	Ending \$	Starting \$	Nxt Raise	Ending \$	Starting \$	Nxt. Raise	Ending \$	Starting \$	Nxt Raise
How did you get this position			How did you get this position			How did you get this position			How did you get this position		
Reason for Leaving:			Reason for Leaving:			Reason for Leaving:			Reason for Leaving:		
Resigned w/ notice: <input type="checkbox"/>			Resigned w/ notice: <input type="checkbox"/>			Resigned w/ notice: <input type="checkbox"/>			Resigned w/ notice: <input type="checkbox"/>		
Requested to resign: <input type="checkbox"/>			Requested to resign: <input type="checkbox"/>			Requested to resign: <input type="checkbox"/>			Requested to resign: <input type="checkbox"/>		
Quit without notice: <input type="checkbox"/>			Quit without notice: <input type="checkbox"/>			Quit without notice: <input type="checkbox"/>			Quit without notice: <input type="checkbox"/>		
Terminated: <input type="checkbox"/>			Terminated: <input type="checkbox"/>			Terminated: <input type="checkbox"/>			Terminated: <input type="checkbox"/>		
Laid Off-How many?: <input type="checkbox"/>			Laid Off-How many?: <input type="checkbox"/>			Laid Off-How many?: <input type="checkbox"/>			Laid Off-How many?: <input type="checkbox"/>		
Reason:			Reason:			Reason:			Reason:		
Direct Supervisor			Direct Supervisor			Direct Supervisor			Direct Supervisor		
Title of Direct Supervisor			Title of Direct Supervisor			Title of Direct Supervisor			Title of Direct Supervisor		
Phone # of Direct Supervisor			Phone # of Direct Supervisor			Phone # of Direct Supervisor			Phone # of Direct Supervisor		

SKILLS- CHECK ALL APPROPRIATE BOXES

SECRETARIAL SKILLS		MISCELLANEOUS	BOOKKEEPING SKILLS						
Typing Statistical Shorthand Speedwriting Dictaphone	Speed	Sales & Demo Telemarketing Office Management Supervisory Data Processing Credit & Collections	Manual	Auto	Yrs.		Manual	Auto	Yrs.
			Bank Rec.				G/L		
			A/P				Trial Bal		
			A/R				Fin. State		
			Payroll				Full Chrg		
			College Accting Hrs.				10 Key		

COMPUTER SYSTEMS

Version: Please list the most current version of the software that you have used.
 Where Used: List the place you used the software (home, work, etc.)
 How Long Used: Show approximate length of time of experience on each particular software
 Rating: Rate yourself on a scale of 1-5. Exposure being 1 and strong proficiency being a 5.
 Last Used: Length of time since you last used each software. If you are currently using, write "now".

Programs	Version	Where Used	How Long	Rating	Last Used	Graphics	Version	Where Used	How Long	Rating	Last Used
	MS Word							Adobe Photoshop			
MS Excel						Fireworks					
Lotus 1-2-3						Illustrator					
Word Perfect						Other					
Presentation Software						Operating System					
Quark						NT					
Freelance						Novell					
Powerpoint						Unix					
Pagemaker						Linux					
Other						Mac					
Data Bases						Windows					
Oracle						Other:					
SQL						Web Design					
Access						Front Page					
Outlook						Visual Interdev					
Accounting Software						Drumbeat 2000					
Quickbooks						Other					
Peachtree						Certifications:					
Mas90											
Other						Programming Languages:					
Internet											
						Hardware:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	(Please check yes if you have exposure in this area.)		
						PC Helpdesk:	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

WORK REFERENCES FROM CO-WORKERS

Name	Company of Co-worker	Position Held	Business Phone	Home Phone
Name	Company of Co-worker	Position Held	Business Phone	Home Phone
Name	Company of Co-worker	Position Held	Business Phone	Home Phone

FOR OFFICE USE ONLY

Typing:	Grammar:	I	II	Word	Excel	Graphics	Database	Entered
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CANDIDATE PROFILE

I evaluate many candidates. It is critical to prioritize which candidates I present to our clients. Therefore, your answers to all the following questions are very important.

COMPENSATION REQUIREMENTS	OVERTIME FLEXIBILITY	LOCATION OF NEW JOB
Minimum \$	Are you willing to work overtime?	Prime
Desired \$	Limited (# Hrs. Week)	Accept
	Flexible (# Hrs. Week)	Will Not Go

PLEASE TELL US WHEN YOU CAN INTERVIEW- PLEASE BE SPECIFIC!

Anytime <input type="checkbox"/>	AM <input type="checkbox"/> Time:	PM <input type="checkbox"/> Time:	Lunch <input type="checkbox"/> Time:
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Most Recent Position

Company Name	Walk me through your job progression leading up to your current responsibilities.
How long in Last Position?	

What have you done which has caused you to stand out among your peers? (i.e. saved money, time, increased work flow)

Liked Most	Liked Least
Most Challenging Aspect	How did you handle this?

What have you accomplished in other positions that made you stand out among your peers.

GENERAL INFORMATION

When we check your references, what will they say?	In what areas do you feel you could improve:
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Give me examples of your greatest strengths on the job:	Give me three adjectives that best describe your personality:
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In which job responsibilities do you excel?	For you, what is important about working?
	How do you know when you have done a good job?

Why should a company hire you instead of someone else?	Career Goals
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What three criteria are most important to you and would cause you to accept a new position? Explain in full below:	Describe the responsibilities you want in your next position:
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1. 2. 3.	What would your present employer do to make you stay?
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List any companies or placement firms you have seen or are scheduled to see:

1. Company	4. Company
2. Company	5. Company
3. Company	6. Company

Questions & Comments:

CANDIDATE PROFILE

Continued

Do you currently hold the professional and/or regulatory certifications (if any) required for the position you are seeking?

Yes No

Has your certification ever been investigated, revoked suspended, denied or subject to discipline by any professional organization or government authority?

Yes No

If you answered "Yes", please explain in detail:

Have you ever been terminated from employment or asked to resign by any employer?

Yes No

If you answered "Yes", please provide names, dates and circumstances of each situation.

<i>Have you ever:</i>	been convicted	<input type="checkbox"/>
<i>pled guilty or received:</i>	Probation	<input type="checkbox"/>
	deferred adjudication	<input type="checkbox"/>
	court-ordered community supervision	<input type="checkbox"/>

or pre-trial diversion for any crime (misdemeanors and/or felonies)?

Yes No

If "Yes" provide complete information on all misdemeanors and felonies (other than parking tickets), including the date(s), location(s), crime and disposition:

I verify that information provided on this application and in resumes/exhibits submitted to the Company is true, complete. I understand that false, misleading, incomplete or omitted information will result in rejection of my application, termination of employment, whenever discovered. I authorize the Company and its agents to confirm all information on this application and in resumes/exhibits, and to investigate my character, qualifications, general reputation and social media activity. I release the Company and all persons and organizations from any claims, liabilities or damages for their investigation and furnishing information about me. I understand that this application is not a job offer or an employment contract for a specific time period. Any employment with the Company will be for an indefinite time period and I may resign or be released without notice or requirement of cause. If employed, I will comply with all Company policies, rules and procedures.

Signed: _____

Date: _____