



Date _____

New Applicant Questionnaire (Please Print Legibly)

Applicant Name _____ E-Mail _____

Home Phone _____ Cell Phone _____

Address _____ City _____ ZIP _____

Nearest Major Cross Streets _____

Schedule Preferences (These are **not** guaranteed schedules) :

Full Time Part Time In Facility Out in Community

Days/Hours Available _____

Will you need additional time and/or assistance to complete Training? Yes No
(For GMS scheduling purposes only – this will NOT affect employment opportunities)

1. How did you hear about our agency?

Friend Family Advertisement
 Van Ad Job Fair Other

2. Do you have a reliable vehicle available to you?

Yes No

3. Are you available to work after school hours? (i.e. afternoons, evenings, and weekends)

Yes No

4. Do you have an Arizona driver’s license, Arizona ID card, or a US Passport (optional) and a Social Security card?

Yes No

5. Can you obtain a First Class Fingerprint Clearance Card and are at least 18 years of age? This means you have no arrests, no convictions, and are not currently awaiting trial.

Yes No

6. Do you have a client? Client Name: _____

Yes No

*****For GMS Office Use Only*****

Application received _____ (Date) By _____

Date/Time: _____ GMS Admin Name _____

Second Interview Scheduled _____