



CAREER PATHWAYS



GOODWILL CAREER PATHWAYS PROGRAM APPLICATION

Applicant must work at Goodwill of Colorado for a minimum of 60 days, be in good standing (not currently under any disciplinary action) and demonstrate satisfactory attendance. If accepted into the Career Pathways Program, the applicant will enter the program on a 30-day trial basis, during which time the employee may elect to withdraw from the program with no negative impact on future applications for re-enrollment.

Please note:

- Employees may not enroll in more than one Career Pathways Program within a 12-month period.
- Enrollment in this program may require a drug test and/or background check.
- Each career pathway training will require a set class size and may be delayed until minimum enrollment is met.

_____	_____	_____	_____
Last Name	First Name	Middle Name / Initial	
_____	_____	_____	_____
Street Address	City	State	ZIP Code
_____	_____		
Phone Number	Email Address		
What is your preferred contact method?	Phone	Email	Text
What is your Goodwill date of hire?	_____		
What is your current job title?	_____		
What is your hourly pay rate?	_____		
How many hours do you work per week?	_____		
At which Goodwill location do you work?	_____		

Please describe your career goals:

Check the box for the one Career Pathways Program (or other training) for which you are applying:

- | | |
|------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Retail Operations | <input type="checkbox"/> Banking |
| <input type="checkbox"/> Warehouse & Logistics | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Commercial Driver's License |
| <input type="checkbox"/> Caregiver | <input type="checkbox"/> Certified Nursing Assistant |

Are you interested in any support services? Please check all that apply:

- | |
|----------------------------------------------------------------|
| <input type="checkbox"/> High School Diploma |
| <input type="checkbox"/> English as a Second Language |
| <input type="checkbox"/> Adult Basic Education-Reading |
| <input type="checkbox"/> Adult Basic Education-Math |
| <input type="checkbox"/> Other Support (please specify): _____ |

I understand I must work at Goodwill of Colorado for a minimum of 60 days, be in good standing (not currently under any disciplinary actions) and demonstrate satisfactory attendance to apply for this program.

Full Name of Applicant / Signature

Today's Date



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STORE/WAREHOUSE MANAGER'S ACKNOWLEDGEMENT

I understand my employee has applied to take the course listed below through Goodwill's Career Pathways Program. The time commitment for this training has been explained to me, and I agree to prioritize my employee's attendance at this training, if applicable.

Name of employee who will attend training: _____

In which department does the employee work? _____

To which Career Pathways Program (or other training) is the employee applying?

- Retail Operations
- Warehouse & Logistics
- Transportation
- Caregiver
- Banking
- Information Technology
- Commercial Driver's License
- Certified Nursing Assistant
- This employee is temporarily ineligible to participate in CPP due to unsatisfactory performance, and/or unsatisfactory attendance, and/or is under action proceedings (please provide an explanation and an approximate date that the action will be resolved in the Store/Warehouse Manager's Comments/Suggestions section).*
- I affirm that the employee listed above has worked at Goodwill for a minimum of 60 days, has performed satisfactorily, has a satisfactory attendance record, and is not currently under disciplinary action.*

Store/Warehouse Manager's Comments/Suggestions:

Store/Warehouse Manager's Name (Print)

Store/Warehouse Manager's Department

Store/Warehouse Manager's Signature

Today's Date

Store/Warehouse Manager's Phone

What is your preferred contact method? Phone Email Text

For Career Pathways communication and coordination, will you be the primary point of contact? (Please circle one)

Yes No

If you prefer not to be the primary point of contact, please provide the name, phone number, and email address below of the person (i.e., assistant manager) who should be contacted for purposes of Career Pathways Program administration and specify their preferred contact method:
