



Employment Application

Mt Playmore Family Fun Center

We do not discriminate on the basis of race, religion, national origin, color, sex, age or disability. We are an equal opportunity employer. It is our intention that all applicants be given equal opportunity and that selection decisions are based on job-related factors. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name : _____ Date _____

Position(s) Applied for or type of work desired : _____

Mailing Address : _____

Telephone Number : _____ Email Address : _____

Type of Employment Desired | Full-Time | Part Time | Temporary / Seasonal | Date available to start _____

Availability Start Time | Mon. _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat _____ Sun _____

Availability End Time | Mon. _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat _____ Sun _____

Have you ever been previously employed by our organization?	Yes	No
If hired, can you submit proof of eligibility to work in the United States?	Yes	No
If you are under 18, can you furnish a work permit if it is required?	Yes	No
Do you have reliable transportation?	Yes	No
Have you ever been involuntarily terminated from a job?	Yes	No
If YES, please explain.		
Have you ever been convicted of any violation of the law? (excluding minor traffic violations)	Yes	No
If YES, please explain. (A conviction will not automatically bar employment)		
How were you referred to us?		

Educational History & Skills

List school name and location, years completed, course of study, and any degrees earned

High School	
College	
Technical Training	
Other	

Summarize any other job-related training, skills, licenses, certificates, and/or other qualifications

Employment History

Please provide all employment information for your past three employers, starting with the most recent.

Employer		Position Held	
Address		Telephone #	
Immediate Supervisor & Title			
Start Date		End Date	
Job Summary			
Reason for Leaving			
<hr/>			
Employer		Position Held	
Address		Telephone #	
Immediate Supervisor & Title			
Start Date		End Date	
Job Summary			
Reason for Leaving			
<hr/>			
Employer		Position Held	
Address		Telephone #	
Immediate Supervisor & Title			
Start Date		End Date	
Job Summary			
Reason for Leaving			

References

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I have read and fully understand the conditions, and that I seek employment under these conditions.

Applicant signature: _____ **Date:** _____