



## EMPLOYMENT APPLICATION

Swaders Sports Park is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

Please answer each question completely. Print clearly and carefully.

Date of application \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number & Street City State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you eligible to work in the U.S.?  Yes  No (Must provide proof upon hire)

Are you at least 18 years or older?  Yes  No (If No, you may be required to provide authorization to work)

Have you ever been employed at Swaders Sports Park?  Yes  No If Yes, when? \_\_\_\_\_

Do you have friends or relatives currently working here?  Yes  No If Yes, list names: \_\_\_\_\_

Salary Expectation: \_\_\_\_\_ Position applying for: \_\_\_\_\_  Full-Time  Part-Time

Schedule Availability: Indicate your availability for each day listed below:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Date you are available to start work: \_\_\_\_\_

How did you hear about the opening?  Walk-In  Advertisement  Employee Referral  Other

Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodation?  Yes  No

Briefly state why you would like to work for our company: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





Have you ever been convicted of a crime other than a minor traffic offense within the last 10 years?

Yes  No Explain: \_\_\_\_\_

(A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime and rehabilitation will be considered).

**EDUCATION & ACTIVITIES**

High School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

GPA: \_\_\_\_\_ # of Years Completed (Circle) 1 2 3 4 Diploma?  Yes  No GED ?  Yes  No

College: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

GPA: \_\_\_\_\_ Major: \_\_\_\_\_ Graduate?  Yes  No Degree Earned: \_\_\_\_\_

List any activities and organizations, volunteer work, or athletics in which you participate (omit any which reflect your race, religion, age, sex, sexual orientation, marital status or disabilities): \_\_\_\_\_

**EMPLOYMENT HISTORY**

Are you currently employed?  Yes  No If Yes, may we contact your present employer?  Yes  No

If you are presently employed, why are you considering leaving? \_\_\_\_\_

*Please begin with your current or last employer:*

Company Name: \_\_\_\_\_ Start Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_

Job Title: \_\_\_\_\_ Pay Rate: \_\_\_\_\_ ( Hourly  Weekly  Bi-Weekly  Monthly  Annually)

Description of Duties: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_





Company Name: \_\_\_\_\_ Start Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Start Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Pay Rate: \_\_\_\_\_ ( Hourly  Weekly  Bi-Weekly  Monthly  Annually)

Description of Duties: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

Company Name: \_\_\_\_\_ Start Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Start Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Pay Rate: \_\_\_\_\_ ( Hourly  Weekly  Bi-Weekly  Monthly  Annually)

Description of Duties: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

**PROFESSIONAL REFERENCES**

*Give names and contact information of three persons not related to you, whom you have known for at least three years:*

Name	Address	Phone	Email	Company	# Yrs Acquainted





#### ADDITIONAL INFORMATION

List any additional information that you would like for us to consider when reviewing your application (special certifications, honors or distinctions, training, etc.)

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#### APPLICANT'S CERTIFICATION & ACKNOWLEDGEMENT

Please read the following carefully before signing and dating this application. Unless otherwise indicated, all references to the "company" shall mean Swaders Sports Park.

In consideration of my employment, I hereby agree and acknowledge the following: I agree to conform to the Company's rules and regulations as they may be issued or modified from time to time. I understand that my employment and compensation (if hired) is not for a definite period of time and may, regardless of the date of payment of my wages or salary, be terminated with or without cause, and with notice, at any time, at the option of the Company. I agree that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as a contract or contract by implication.

I certify that the information contained in this Employment Application is correct and complete to the best of my knowledge, and I understand that falsification, misrepresentation or omission of facts called for in this application, regardless of the discovery date, is grounds for termination of my employment without notice. I further authorize Swaders Sports Park to verify the accuracy of this information and to obtain reference information on my work performance. I hereby release the Company from any and all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_