

The Fun Center at Paige's Crossing

Application of Employment

Name: _____
Last First Middle

Date: _____

Address: _____
Street Address City State Zipcode

Telephone Number: _____ / _____ / _____

Date of Birth: _____ / _____ / _____
Month Day Year

Date You Can Start: _____ / _____ / _____
Month Day Year

Are you Employed? YES | NO If yes where? _____
Circle One

May We Inquire Your Present Employer? YES | NO
Circle One

Former Employers

1. _____

Name Phone Number Position Reason for leaving or staying

2. _____

Name Phone Number Position Reason for leaving or staying

3. _____

Name Phone Number Position Reason for leaving or staying

Education

Name of School Attending: _____

Current Grade Level: _____

Position Applying for: _____

References

1. _____

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Name Telephone Number Relationship Years Known

2. _____

—

Name Telephone Number Relationship Years Known

3. _____

—

Name Telephone Number Relationship Years Known

Hours Available:

Monday _____ **Tuesday** _____ **Wednesday** _____

Thursday _____ **Friday** _____ **Saturday** _____

Sunday _____

Authorization

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on the application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal and otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.”

Date: ___/___/___ **Signature** _____