LASER Alleys
FAMILY FUN CENTER

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

PERSONAL

Last Name First Middle	Date
Street Address	Home Telephone ( )
City, State, Zip	Business Telephone ( )
Have you ever applied for employment with us? ☐ Yes ☐ No If yes: Month and Year _____ Location _____	Social Security #
Position Desired	Pay Expected
Apart from absence for religious observance, are you available for full time work? ☐ Yes ☐ No If not, what hours can you work? _____	Will you work overtime if asked? ☐ Yes ☐ No
Are you legally eligible for employment in the United States?	When will you be available to begin work? _____
Other special training or skills (languages, machine operation, etc.)	

EDUCATION

SCHOOL	Name and Location of School	Course of Study	No. of Years Completed	Year Graduated
Graduate				
College				
Business/Trade/ Technical				
High School				

EMPLOYMENT		Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1

Company Name	Telephone ( )
Address	Employed *(State month and year)* From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason For Leaving

2

Company Name	Telephone ( )
Address	Employed *(State month and year)* From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason For Leaving

3

Company Name	Telephone ( )
Address	Employed *(State month and year)* From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason For Leaving

4

Company Name	Telephone ( )
Address	Employed *(State month and year)* From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason For Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact	*DO NOT CONTACT*
	Employer Number(s) _____ Reason:_____ _____

PERSONAL REFERENCES   *(Not former employers or relatives)*

Name	Relationship or Title	Phone ( )
Name	Relationship or Title	Phone ( )
Name	Relationship or Title	Phone ( )

☐	Number of dependents including yourself	Sex ☐ ☐ Male ☐ Female	Are you a Vietnam Veteran ☐ ☐ Yes ☐ No

☐	Marital Status ☐ Single ☐ Engaged ☐ Married ☐ Separated ☐ Divorced ☐ Widowed	☐ Date of Marriage
		Are you a US Citizen ☐ ☐ Yes ☐ No

☐	What was your previous address	☐ How long at present address _____ years
		☐ How long at previous address _____ years

☐	Have you ever been bonded? ☐ Yes ☐ No If "Yes" with what employers?	Are you over 18 years of age ☐ ☐ Yes ☐ No *If not, employment is subject to verification of age*

☐	Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court. ☐ Yes ☐ No If "Yes" describe in full:

☐	Are there days you cannot work? When:	Do you own a car? ☐ Yes ☐ No Do you have a driver's license? ☐ Yes ☐ No	Do you consider yourself to be a good salesman? ☐ Yes ☐ No

S I G N A T U R E	The information provided in the Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. If you decide to engage an investigative consumer reporting agency to report on my credit and personal history. I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.
	_____ _____
	Date Signature

R E F E R E N C E C H E C K	Employer	Person Contacted	Results
	1		
	2		
	3		
	4		

PERSONAL REFERENCE CHECK

Name	Results
Name	Results
Name	Results

I N T E R V I E W R E S U L T S	Interviewer Name and Comments