

Storyland

Employment Application

Programs, services and employment are equally available to everyone. Please inform the Human Resources Dept. if you require reasonable accommodation for the application or interview.

Applicant Data:

Date of Interview (month/day/year)

How were you referred to us?

Position Applied for:

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobil/pager: _____ Email: _____

Are you at least 18 years of age or older? ____yes ____no

Have you ever worked for this company? ____yes ____no

Are you a citizen of the United States? ____yes ____no

If not are you legally allowed to work in the United States? ____yes ____no

Type of Employment desired: ____Full-time ____Part-time ____Temporary ____Seasonal

Have you ever pleaded guilty, no contest, or been convicted of a crime? ____yes ____no

If yes please give details: _____

Have you ever been investigated by Family Protective Services? ____yes ____no

If yes please give details: _____

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number (if applicable to position) _____ state _____

Education:

College Name _____
Location: _____
Graduated? ____yes ____no From: _____ To: _____
Type of Degree _____

High Sch. Name: _____
Location: _____
Graduated? ____yes ____no From: _____ To: _____

CPR/First Aid Training: If so, when? _____ Expiration Date _____

Special Skills/ Talents/ Awards:

Previous Employment (begin with the most recent)

Date of Employment: From ___/___/___ To: ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

May we contact this employer for a reference? ___yes ___no

Date of Employment: From ___/___/___ To: ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

May we contact this employer for a reference? ___yes ___no

Date of Employment: From ___/___/___ To: ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

May we contact this employer for a reference? ___yes ___no

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for employment decision. I hereby release employers, schools, or individuals from all liability when responding to inquires in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: ___/___/___

