

14188 Manchester Road Manchester, MO 63011 Phone 636.386.8000

Employment Application

An equal opportunity and affirmative action employer PRE-EMPLOYMENT QUESTIONNAIRE - EQUAL OPPORTUNITY EMPLOYER

Personal Information Middle Initial First Name Social Security Number Other names by which you have been known (for date verification and reference checking purposes) Referred By Home Phone Present Address Permanent Address **Employment Interest** Position Desired Salary Desired Date Available Are you currently employed? OYes ONo If so, where? OYes ONo If so, may we contact? Have you applied to Soccer Master before? Yes No If so, when, where? **Education and Training** Indicate last level completed: High School College or University Name of High School, Technical School, and College City,State **General Information** Subjects of Special Study/Research-Work or Special Training/Skills U.S. Military or Naval Service Rank **Availability** Fill In Each Day with Available Times You Can Work SUN MON TUE WED **THUR** FRI SAT Comments Pertaining To Schedule

Employment History Please List Last Three Employers Starting with the Most Recent Ending Company Name and Phone Number **Dates Employed** Starting **Positions** Reason From-To Held Salary Salary For Leaving References Give Information of Three Persons not Related to You and Known at Least One Year Relationship Phone Number Career Field Years Known **Acknowledgement and Authorization** *I certify that the facts contained in the application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this 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 or 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. * the waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws. Printed Name Digital Signature **Do Not Write Below This Line** Interviewed By Interview Date

SOCCERMASTER APPLICATION FOR EMPLOYMENT

Communication

Hired Location / Position

Personality

Salary Wages

Starting Date

Phone Number

Character

Neatness