## $H_2Oasis$ POSITION APPLIED FOR: \_\_\_\_\_ Indoor Waterpark TELEPHONE: **Employment Application** DATE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_ YOUR NAME: Last First Middle ADDRESS: ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE USA? YES NO (IF YES, VERIFICATION WILL BE REQUIRED.) HAVE YOU BEEN CONVICTED OF A FEL ONY? IF NECESSARY FOR THE JOB I AM ABLE TO I AM SEEKING A $\Box$ FULL TIME OR $\Box$ PART TIME JOB. WORK OVERTIME? YES NO

& ABLE TO \	WORK: [	AM	🗆 РМ	BOTH	WORK WEEKENDS?	□ YES □ NO		
&	HOURS PE	ER WEEK			PROVIDE VALID AK D	RIVERS LICENSE?	Sec. Yes	🗆 No

IF NECESSARY FOR THE JOB, ARE YOU OVER (Please mark one)	
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I WILL BE ABLE TO REPORT TO WORK \_\_\_\_\_ DAYS AFTER BEING NOTIFIED THAT I AM HIRED.

EDUCATION:	YRS COMPLETED	FIELD OF STUDY	GRADUATE OR DEGREE
HIGH SCHOOL:			
COLLEGE/UNIVERSITY:			
BUSINESS/TECHNICAL:			
OTHER:			
	•		

DUTY/SPECIALIZED TRA INING: \_\_\_\_\_

## **REFERENCES**: LIST TWO PERSONAL REFERENCES WHO ARE <u>NOT</u> RELATIVES OR FORMER SUPERVISORS.

NAME		ADDRESS	PHONE	OCCUPATION	YEARS KNOWN
NAME		ADDRESS	PHONE	OCCUPATION	YEARS KNOWN
EMPLOYMENT:		t first. include summer or temporary here, in the summary (following this s			
Employer Name &	Address	Position Title / Duties / Skills / Wag	е		Dates Employed From to
					Reason for leaving
		Supervisor's Name:	Telephone	<u>:</u>	

## EMPLOYMENT CONTINUED...

Employer Name & Address	Position Title / Duties / Skills / Wage		Dates Employed
			From to
			Reason for leaving
			Reason for leaving
	Supervisor's Name:	Telephone:	

Employer Name & Address	Position Title / Duties / Skills / Wage		Dates Employed
			From to
			Reason for leaving
	Supervisor's Name:	Telephone:	
	Supervisor 3 Name.	relephone.	

Summarize other employment &

volunteer activities related to this job: \_

Types of computers, other electronic or mechanical equipment that you are qualified to operate or repair:

Typing speed: \_\_\_\_\_words per minute.

Professional Licenses, Certifications or Registrations: \_

Additional skills including supervision skills, other languages, or information Regarding the career/occupation you wish to bring to the employer's attention: \_\_\_\_

In case of accident or illness please contact:	Daytime
Name:	Phone:
Address:	Relationship:

**INFORMATION TO THE APPLICANT.** As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

You will be required to supply your birth certificate or other proof of authorization to work in the US. You may also be required to have a physical examination and/or drug test, or to sign a conflict of interest agreement and abide by its terms. If necessary for employment, we may perform a background and credit check.

I certify that the facts contained in this application are true and complete to the best of my knowledge. 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. I release the company from all liability for any damage that may result from utilization of such information. I understand and agree to the information shown above.

Signature:

Date:

**Equal Employment Opportunity**: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Employer Section: