Andraschko, LLC. d/b/a Sky Zone Des Moines 1300 SE Gateway Drive, Suite 103 Grimes, IA 50111



Employment Application

Please Print					
Name:		Date:			
Home Phone: ()	Secondary Phone: (_	Secondary Phone: ()			
Social Security Number:					
Present Address:					
No. Street e-mail address for pay stub:		State	Zip		
Employment Desired					
Position applying for:					
What days and hours are you available to work	k?:				
Are you available on the weekends?: [] Ye	s []No				
Would you be available to work overtime if neo	cessary?: []Yes []N	lo			
If hired, what date can you start work?:		· · · · · · · · · · · · · · · · · · ·			
Salary or wage desired:					
5					
Personal Information		1.1.1			
Have you ever applied to or worked for Sky Zo	one before?: [] Yes [] No			
Do you have any friends or relatives working for	or Sky Zone?: [] Yes	[] No			
If yes, state name(s) and relationship?:					
Why are you applying for work at Sky Zone?: _					
Do you have reliable means of transportation t	to and from work?: []Ye	s []No			
Are you at least 18 years of age?: [] Yes					
(If under 18 hire is subject to verification that you ar	re of legal minimum age)				

If hired, can yo this country?:	ou present evidence of your U.S. Citizenship or pro [] Yes	oof of your lega	al right to live	e and work in
Are you able to	p perform the essential functions of the job for which	ch you are app	olying, either	with or without
reasonable ac	commodation?: [] Yes [] No			
If no, describe	the functions that cannot be performed:			
	ly with the ADA and consider reasonable accommodati ts/employees to perform essential functions. Hire may nd agility tests.)			
Have you ever	been convicted of a criminal offense (felony or se	rious misdem	eanor)?: [] Yes [] No
(Convictions for	Marijuana -related offenses that are more than two year	ars old need not	be listed)	
If yes, state the	e nature of the crime(s), when and where convicte	d, and disposi	tion of the ca	ase:
				····
of the offense, the position(s) applied	ant will be denied employment solely on the grounds of ne date of the offense, the surrounding circumstances a ed for may, however, be considered.) Training, and Experience			
School	Name and Address	# of Years Completed	Did you graduate?	Degree or diploma earned
High School			[] Yes [] No	
College/ University			[] Yes [] No	
Vocational/ Business			[] Yes [] No	
Health Care			[] Yes [] No	
	write, or understand any foreign languages?: [inguage(s) and how proficient?:]Yes []N	0	

Employment History

Beginning with your present or last employer, list all previous employment for the past 5 years. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of employe	r	Address		Type of business
Name of immedia	te supervisor	Supervisor's ti	tle and telephone	number
Title of your position	on	Reason for lea	aving	
Starting date	Final date	Starting pay	Final pay	Hours worked per week
Duties				
May we contact yo	our present empl	oyer? [] Yes [] No [] l	Please contact me first
Name of employe	r	Address		Type of business
name of employe	I	Address		Type of business
Name of immedia	te supervisor	Supervisor's ti	tle and telephone	number
Title of your position	on	Reason for lea	aving	
Starting date	Final date	Starting pay	Final pay	Hours worked per week
Duties				
Duties				
May we contact yo	our present empl	oyer? [] Yes [] No [] I	Please contact me first

References
List below three persons not related to you who have knowledge of your work performance within the last three years.

name:						
Address: _			O.U.			
		Street	City	State	Zip	
Telephone	elephone #: ()		Number of Years Acquaint	ed:		
Name:						
Address: _					,	
	No.	Street	City	State	Zip	
Occupation	า:					
Telephone	#: ()	Number of Years Acquaint	Number of Years Acquainted:		
Address: _		Street	City	State	Zip	
Occupation			 ,	State	—.p	
			Number of Years Acquaint	ed:		
Pleas	e Re	ad Carefull	y, Initial Each Paragra _l	ph and Sig	gn Below	
I herel	by certify	that I have not knowing	y withheld any information that might adversely	affect my chances f	or employment and	
that t	he answe	ers given by me are tru	e and correct to the best of my knowledge.	I further certify that	I, the undersigned	
			his application. I understand that any omission secure employment shall be grounds for reject			
		· = '	of the time elapsed before discovery.	non or this application	on or ior infinediate	
	-		oughly investigate my references, work record, er, authorize the references I have listed to disc			
	-		to my work records, without giving me prior n		•	
	•		er employers, and all other persons, corporation			
any a	nd all cla	ims, demands, or liabiliti	es arising out of or in any way related to such ir	ivestigation or disclo	sure.	
I unde	erstand th	at nothing contained in	this application, or conveyed during any intervi	ew which may be g	ranted or during m	
			eate an employment contract between me and			
	-		mployment is for no definite or determinable per on of either myself or the company, and that no		•	
			unless made in writing and signed by me and th	•	•	
Applicant'	's Sians	ature:		Date:		