EMPLOYMENT APPLICATION

In compliance with Federal and State equal employment opportunity laws, it is this company's intention to consider all applicants without regard to race, color, religion, sex, national origin, age, marital status, disability, the presence of non-job related medical conditions or any other protected classification.

(PLEASE PRINT CLEARLY) **TODAY'S DATE**:_____

Social Security No. #_____ **Are you 18 years of age or older? ___Yes ___ No**

WERE YOU REFERRED BY ANYONE AND IF SO, WHOM?_____

NAME_____
LAST FIRST MI

***It is very important that one or more phone number(s) be provided where you can be contacted during the day, night, and/or weekends. Please indicate if these numbers are your home or cell number.**

***PHONE NO** ( )_____ ( )_____ ( )_____
Daytime Number Night Number Weekend Number

CURRENT ADDRESS_____
STREET OR APT. CITY STATE ZIP CODE

PERMANENT ADDRESS_____
STREET OR APT. CITY STATE ZIP CODE

HIGH SCHOOL ATTENDED:_____ DID YOU GRADUATE: ___YES ___NO

COLLEGE ATTENDED/ATTENDING_____NO. OF YEARS COMPLETED? _____

FIELD OF STUDY_____DID YOU GRADUATE: ___YES ___NO

EMPLOYMENT DESIRED: **Full-Time** _____ **Part-Time** _____

Please <u>number</u> the positions in order of priority that you are interested in applying for.

____ PATRON SERVICES (Ushers, ticket-takers, door guards, switchboard, etc.)
____ PRODUCTION (Staging, rigging, spotlight, sound, computer message center, etc.)
____ MAINTENANCE/CONVERSION – MANUAL LABOR FOR ARENA CHANGEOVERS
(Changing Building over from one event to another)
____ STAGE SECURITY
____ PARKING ATTENDANT
____ TICKET SELLERS (Box Office using computers and Customer Service)
____ HOUSEKEEPING (Matrons, porters, post event cleanup, etc.)
____ CATERING/CONCESSIONS (Wait staff, bartenders, concession worker, utility worker, culinary, etc.)
____ OTHER (PLEASE SPECIFY): _____

DATE YOU CAN START:_____

ARE YOU AVAILABLE TO WORK: MORNINGS:____YES ____NO EVENINGS: ___YES ____NO
HOLIDAYS:____ YES ____NO SUNDAYS: ___YES ____NO

ARE YOU EMPLOYED NOW?_____ IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?_____

EMPLOYMENT EXPERIENCE (Start with the most recent)

1. NAME OF COMPANY:_____DATES OF EMPLOYMENT:_____

   NAME OF SUPERVISOR:_____PHONE #_____

   JOB TITLE:_____REASON FOR LEAVING:_____

2. NAME OF COMPANY:_____DATES OF EMPLOYMENT:_____

   NAME OF SUPERVISOR:_____PHONE #_____

   JOB TITLE:_____REASON FOR LEAVING:_____

REFERENCES:

1. NAME:_____PHONE #_____YEARS KNOWN_____

2. NAME:_____PHONE #_____YEARS KNOWN_____

GENERAL INFORMATION:

Have you ever been convicted of, pled guilty to or pled no contest to a crime, excluding Misdemeanors and traffic violations? _____ Yes _____ No *(Conviction will not necessarily disqualify an applicant for employment.)

If Yes:

Date	Nature of Conviction	Where	Disposition of Offense

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. To determine my qualifications for employment, I authorize this company to review my previous employment, driving, and criminal records, and/or other background data as it may relate to the position(s) for which I am applying. I hereby authorize all former employers and educational institutions to furnish their records, together with all information they may have concerning me whether on record or not. I also release any person, firm, or institution from any and all liability for any damage whatsoever for issuing such information. Should this company employ me, the foregoing authorization and release shall extend to this company in connection with issuing such information to future prospective employers.

Date: _____ **Signature:** _____

Revised 11 /2006