

Outlaw Pass Application

Employment Application

Full Name: _____ Date: _____

Address: _____
Street Address City State ZIP code

Phone: _____ Email: _____

In order to work here, you must be at least 16 years of age. If you are a minor, can you provide proof of age with a birth certificate or driver's license? Yes _____ No _____

Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge? ____Yes ____No
If your answer is "Yes," explain in concise detail on a separate page, giving dates and nature of the offense, name and location of the court, and disposition of the case(s). A conviction may not disqualify you, but a false statement will.

Dates/Times Available:

	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM						
PM						

Job Experience – Start with most recent

Employer Name _____ Supervisor Name _____
Employer Address _____ City _____ State _____ Zip _____
Employer Phone # _____ May we contact this employer: Yes _____ No _____
Dates of Employment: Start Date _____ End Date _____
Reason for Leaving (Please be specific): _____

Employer Name _____ Supervisor Name _____
Employer Address _____ City _____ State _____ Zip _____
Employer Phone # _____ May we contact this employer: Yes _____ No _____
Dates of Employment: Start Date _____ End Date _____
Reason for Leaving: _____

Employer Name _____ Supervisor Name _____
Employer Address _____ City _____ State _____ Zip _____
Employer Phone # _____ May we contact this employer: Yes _____ No _____
Dates of Employment: Start Date _____ End Date _____
Reason for Leaving: _____

Job Skills _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes _____ No _____ Grade Level: _____ or GED _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes _____ No _____ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes _____ No _____ Degree: _____

References

Please list three **professional references**. (Non-friend and Non-related)

1. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
2. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
3. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED

I certify that I have fully and accurately answered all questions and have given all information requested in this application for employment, and I understand that any wrong or incomplete information on the form may disqualify me for further consideration for employment or, if discovered after I am hired, may be grounds for my immediate dismissal.

I understand that all such information is subject to verification by the Company, and hereby give my consent to the Company to investigate my background and qualifications using any means, sources, and outside investigators at its disposal.

I agree to undergo any type of drug and/or alcohol testing that the Company may require at any time.

Finally, I understand that submission of this application does not necessarily mean that I will be hired, and that if I am hired, my employment will be at will, and either I or the Company may terminate my employment at any time, with or without notice or reason.

Applicant Signature

Date