

ALL AMERICAN INDOOR SPORTS, INC.

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion or national origin.

PERSONAL INFORMATION				
Are You 18 Years or Older?		Social Security Number: - -		
Name:				
	Last	First	Middle	
Current Address:				
(From / / To / /)	Street	City	State	Zip
Past Address:				
(From / / To / /)	Street	City	State	Zip
Phone Number: Home: () -		Cell: () -		
Email Address:				
EMPLOYMENT DESIRED				
Date of Application:		Date You Wish To Start:		
Position:		Salary:		Hours Per Week:
Days You Can Work:		Monday	Tuesday	Wednesday
		Thursday	Friday	Saturday
		Sunday		
(circle the appropriate days)				
Reasons for applying with this specific organization:				
Are you capable of satisfactorily performing the duties of the position for which you are applying?				
		Yes	No	
EDUCATION				
	Name and Location of School	Last Year Completed	Did You Graduate?	Subjects Studied
Elementary		5 6 7 8		
High School		9 10 11 12		
College		1 2 3 4		
Describe Any Specialized Training, Military Experience, Skills and Extra-Curricular Activities:				
(Other Than Religious)				
Exclude Organization, The Name of Character of Which Indicates The Race, Age, Sex, Color or National Origin of Its Members.				
PERSONAL REFERENCES				YEARS ACQUAINTED
NAME	TELEPHONE	OCCUPATION		
	() -			
	() -			
	() -			

CONTINUED ON OTHER SIDE

PREVIOUS EMPLOYMENT

Please list your three employers, starting with your most recent.

DATE MONTH AND YEAR	NAME AND TELEPHONE OF CURRENT OR LAST EMPLOYER	STARTING SALARY	ENDING SALARY	YOUR TITLE OR POSITION
FROM :				
TO:	() -	\$	\$	
Supervisor:				
REASON FOR LEAVING:				

DATE MONTH AND YEAR	NAME AND TELEPHONE OF CURRENT OR LAST EMPLOYER	STARTING SALARY	ENDING SALARY	YOUR TITLE OR POSITION
FROM :				
TO:	() -	\$	\$	
Supervisor:				
REASON FOR LEAVING:				

DATE MONTH AND YEAR	NAME AND TELEPHONE OF CURRENT OR LAST EMPLOYER	STARTING SALARY	ENDING SALARY	YOUR TITLE OR POSITION
FROM :				
TO:	() -	\$	\$	
Supervisor:				
REASON FOR LEAVING:				

May we contact your current employer: Yes No

If no, please explain why:

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances:

Have you been convicted of a felony within the last 5 years? ** Yes No

Describe:

** You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENT ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES 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 ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED ANY TIME WITHOUT ANY PRIOR NOTICE."

DATE: _____ SIGNATURE: _____