



Applicants will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap, or veteran status.

Today's Date: _____ Social Security Number: _____ - _____ - _____

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LAST NAME FIRST INITIAL (MAIDEN NAME)

STREET ADDRESS APT. #

CITY STATE ZIP CODE

HOME TELEPHONE E-MAIL ADDRESS CELL PHONE NUMBER

POSITION DESIRED: _____ PAY EXPECTED: _____

HOW DID YOU HEAR ABOUT US? ___ NEWSPAPER ___ FRIEND ___ WALK-IN ___ EMPLOYEE REFERRAL ___ INTERNET

NAME OF EMPLOYEE WHO REFERRED YOU TO US, IF APPLICABLE: _____

WERE YOU EVER PREVIOUSLY EMPLOYED HERE? () YES () NO WHEN- MO/YR _____

DAYS & HOURS YOU CAN WORK? _____ FULL-TIME WORK DESIRED? () YES () NO

WILL YOU WORK OVERTIME, IF ASKED? () YES () NO WHEN ARE YOU AVAILABLE TO BEGIN WORK:? _____

NAME OF ANY OF YOUR RELATIVES CURRENTLY WORKING FOR US: _____

IMPORTANT: PLEASE ANSWER ALL QUESTIONS IN THIS SECTION

THE INFORMATION REQUESTED IS FOR LEGALLY PERMISSIBLE REASONS, INCLUDING, WITHOUT LIMITATION, NATIONAL SECURITY CONSIDERATIONS, A LEGITIMATE OCCUPATIONAL QUALIFICATION, OR BUSINESS NECESSITY.

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.? () YES () NO ARE YOU A U,S, CITIZEN? () YES () NO

IF HIRED YOU ARE REQUIRED TO PROVIDE WRITTEN PROOF OF IDENTITY AND ELIGIBILITY TO WORK IN THE U.S.. EXAMPLE: **US CITIZENS** SOCIAL SECURITY CARD AND PICTURED ID. **LEGAL RESIDENT ALIENS** MUST PRESENT: PERMANENT RESIDENT CARD, AND SOCIAL SECURITY CARD.

ARE YOU OVER 21 YEARS OLD? () YES () NO ARE YOU A VIETNAM VETERAN? () YES () NO

DO YOU HAVE A VALID DRIVER'S LICENSE () YES () NO LICENSE # _____ ISSUING STATE _____

DID YOU SERVE IN THE US MILITARY? () YES () NO IF YES, WHAT BRANCH: _____

HAVE YOU EVER BEEN ARRESTED? () YES () NO

ANSWERING FALSELY TO THIS QUESTION AUTOMATICALLY DISQUALIFIES CANDIDATES FROM EMPLOYMENT, OR ANYTIME DURING EMPLOYMENT.

IF "YES," WHAT WERE YOU CHARGED WITH, AND WHAT YEAR DID IT HAPPEN: _____

STARTING WITH YOUR MOST RECENT EMPLOYER, PROVIDE COMPLETE INFORMATION REGARDING EMPLOYMENT HISTORY INCLUDING COMPLETE ADDRESSES, PHONE NUMBERS, FIRST AND LAST NAMES OF SUPERVISORS. PROVIDING INCOMPLETE INFORMATION COULD REDUCE YOUR CONSIDERATION FOR EMPLOYMENT. DO NOT SAY "SEE RESUME".

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COMPANY NAME

FIRST & LAST NAME OF SUPERVISOR

ADDRESS CITY ST.

TELEPHONE

JOB TITLE

JOB DESCRIPTION (WHAT DID YOU DO THERE?)

REASON FOR LEAVING (DO NOT SAY PERSONAL)

WEEKLY PAY

HIRE DATE: _____ FINAL DATE: _____
Mo/YR Mo/YR

MAY WE CONTACT THIS EMPLOYER? () YES () NO

COMPANY NAME

FIRST & LAST NAME OF SUPERVISOR

ADDRESS CITY ST.

TELEPHONE

JOB TITLE

JOB DESCRIPTION (WHAT DID YOU DO THERE?)

REASON FOR LEAVING (DO NOT SAY PERSONAL)

WEEKLY PAY

HIRE DATE: _____ FINAL DATE: _____
Mo/YR Mo/YR

MAY WE CONTACT THIS EMPLOYER? () YES () NO

COMPANY NAME

FIRST & LAST NAME OF SUPERVISOR

ADDRESS CITY ST.

TELEPHONE

JOB TITLE

JOB DESCRIPTION (WHAT DID YOU DO THERE?)

REASON FOR LEAVING (DO NOT SAY PERSONAL)

WEEKLY PAY

HIRE DATE: _____ FINAL DATE: _____
Mo/YR Mo/YR

MAY WE CONTACT THIS EMPLOYER? () YES () NO

HAVE YOU EVER BEEN FIRED FROM A JOB? () YES () NO IF YES, PLEASE GIVE DETAILS INCLUDING EMPLOYER NAME.

PLEASE DESCRIBE ANY TRAINING RECEIVED RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING: _____

LIST ANY COMPUTER SKILLS YOU HAVE: _____

LIST MEMBERSHIP IN PROFESSIONAL, CIVIC, OR VOLUNTEER ORGANIZATIONS. (EXCLUDE THOSE WHICH MAY DISCLOSE YOUR RACE, COLOR, ELIGION OR NATIONAL ORIGIN.)

SCHOOL	NAME & ADDRESS (INCLUDING CITY & STATE)	DATES ATTENDED	DID YOU GRADUATE? Y/N	COURSE OF STUDY
ELEMENTARY				
HIGH SCHOOL				
BUSINESS, TRADE OR TECHNICAL				
COLLEGE				
GRADUATE SCHOOL				

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Please provide complete information including first and last names, and complete phone numbers.

NAME	PHONE NUMBER	RELATIONSHIP TO YOU
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The information provided in this Application for Employment is true, correct, and complete. Any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I also understand a pre-employment drug test is administered upon my acceptance of an offer of employment.

I authorize the release of information concerning my employment, medical or financial history as it relates to my application for employment. I release from liability and promise to hold harmless, under any and all possible causes of legal action, any and all persons, or entities who shall furnish any information or opinions to employees of Tucson Greyhound Park who conduct my employment history and background investigation. I understand the investigative information gathered is confidential.

If hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law.

I also understand that if I hired, I will be required to provide proof of identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

Signature

Date

e-mail to : admin@tucsongreyhound.com

FOR OFFICE USE ONLY:

Interviewer's Name: _____

COMMENTS: