



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

STREET ADDRESS APT. #

CITY STATE ZIP CODE

DATE OF BIRTH E-MAIL ADDRESS 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? ___ No ___ Yes WHEN- Mo/YR _____

DAYS & HOURS YOU CAN WORK? _____ FULL-TIME WORK DESIRED? ___ No ___ Yes

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 ___ No ___ Yes LICENSE # _____ ISSUING STATE _____

DID YOU SERVE IN THE US MILITARY? ___ No ___ Yes _____ (BRANCH)

HAVE YOU EVER BEEN ARRESTED? ___ No ___ Yes

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".

E M P L O Y E M E N T H I S T O R Y	_____		_____
	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: _____	MAY WE CONTACT THIS EMPLOYER? ____ Yes ____ No
	Mo/YR	Mo/YR	

_____		_____	
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: _____	MAY WE CONTACT THIS EMPLOYER? () Yes () No	
Mo/YR	Mo/YR		

_____		_____	
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: _____	MAY WE CONTACT THIS EMPLOYER? () Yes () No	
Mo/YR	Mo/YR		

HAVE YOU EVER BEEN FIRED FROM A JOB? ____ No ____ Yes 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.) _____

E D U C A T I O N	SCHOOL	NAME & ADDRESS (INCLUDING CITY & STATE)	DATES ATTENDED	DID YOU GRADUATE?	COURSE OF STUDY	
	ELEMENTARY				YES	
					NO	
	HIGH SCHOOL				YES	
					NO	
	BUSINESS, TRADE OR TECHNICAL				YES	
NO						
COLLEGE				YES		
				NO		
GRADUATE SCHOOL				YES		
				NO		

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

R E F E R E N C E S	NAME	PHONE NUMBER	RELATIONSHIP TO YOU
	1.		
	2.		
	3.		
	4.		

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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

FOR OFFICE USE ONLY:

Interviewer's Name: _____

COMMENTS: