This Organization Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you with written instructions and an opportunity to contact DHS and/or the SSA before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to prescreen job applicants and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo matching tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS)

photograph.

NOTICE:

Federal law requires
all employers
to verify the identity and
employment eligibility
of all persons hired to work
in the United States.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 800-255-7688, 800-237-2515 (TDD) or at www.justice.gov/crt/osc.

Employment Verification.



Done.

For more information on E-Verify, please contact DHS at:

888-897-7781





E-VERIFY IS A SERVICE OF DHS AND SSA

M-780 (rev. 12/2010)



Application for Employment

All applicants will receive consideration for employment without regard to race, gender, religion, sexual orientation, pregnancy, age, marital status, national origin, genetic information, physical or mental handicap or any other characteristic that is prohibited by law. The following information is requested in order to help us make the best possible placement within the Company. Our Company subscribes to a **drug free work place You may be required to submit to a drug screen as part of your initial application process.** All portions of this application pertaining to you must be completed. Please do not refer to information on your resume.

We appreciate the time you spend completing this application

	vve арргесіате	ine iime you spena com	pietirig triis application
Position Desired Position Applied For:	Location:		
	ent <u>\$</u>	hourly	weekly
Have you ever worked for this company? Yes	No		
<u>Personal</u>			
Name:			
Last	First	Middle Initial	
Other names used:			
Present Address: Street	City	State	
Home Number:	Cell Phone Number:		
Consent for Background Investigation			
It is the intent of the Company to keep all information we receive read and sign the statement below allowing the Company to verification. If thereby agree to have the President/Owner of the Company to investigate or verify any information I have given on this approximate to be suitability for employment. I further agree to have my work be rights to bring any action for defamation, invasion of privacy, of what is said about me. I also understand that the information fact or facts in connection with this Application for Employment if I am already employed."	iy past employment and inform his designee or any agent of plication, or to discuss my bac ackground discussed by any p or any similar cause of action, I supply will be checked and t will result in no offer of emp	ation given on this ap the company contact ekground, past perform person so contacted, against anyone conta that any false statem loyment or dismissal	plication. anyone necessary mance, or my and waive all my acted as a result of ent or omission of
Signature:		Date:	

Application for Employment - Continued

York Experience Please account for all time for the last Begin with your most recent job. Use	five (5) years. Include periods of u	nemployment and any prior employment by this Company. d. Do not reference resume .
	May we contact	
Present Employer	Address	From Mo/Yr To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?
Your title and description of your duties:		Ending Salary, Mo/Hrly?
		Reason for Leaving?
Employer	Address	From Mo/Yr To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?
Your title and description of your duties:		Ending Salary, Mo/Hrly?
		Reason for Leaving?
Employer	Address	From Mo/Yr To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?
Your title and description of your duties:		Ending Salary, Mo/Hrly?
		Reason for Leaving?
Employer	Address	From Mo/Yr To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?
Your title and description of your duties:		Ending Salary, Mo/Hrly?
		Reason for Leaving?
Employer	Address	From Mo/Yr To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?
Your title and description of your duties:		Ending Salary, Mo/Hrly?
		Reason for Leaving?

References (Please list two former supervisors and/or associates who are acquaint	ed with your work performar	nce.)		
Name Organization Area 0	Code and Business Phone			
Title Home Address	City, State, Zip			
Working Relationship Are	ea Code and Home Phone			
Name Organization Area (Code and Business Phone			
Name Organization Area (Sode and Business Phone			
Title Home Address	City, State, Zip			
Working Relationship Are	ea Code and Home Phone			
eneral Information				
Federal law prohibits the employment of unauthorized persons. Should you be hired, satist will be required within three (3) working days of hire. Failure to submit such proof within the		n imme	diate disn	
		Yes	No	
If hired, can you furnish proof of citizenship or authorization to work?				
				□n/a
If you are under the age of 18 years old, do you have a work permit?				
If you are under the age of 18 years old, do you have a work permit? If required, would you be willing to work:	Shifts?			
	Weekends?			
	Weekends? Holidays?			
If required, would you be willing to work: Are you able to perform the essential functions of the job for which you are app	Weekends? Holidays? lying, with or with-			
If required, would you be willing to work: Are you able to perform the essential functions of the job for which you are app out reasonable accommodations, in a safe or efficient manner?	Weekends? Holidays? lying, with or with-			
If required, would you be willing to work: Are you able to perform the essential functions of the job for which you are app out reasonable accommodations, in a safe or efficient manner? Have you ever been convicted of a felony in the past five (5) years? * If yes, ex	Weekends? Holidays? lying, with or with-			
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If required, would you be willing to work: Are you able to perform the essential functions of the job for which you are appout reasonable accommodations, in a safe or efficient manner? Have you ever been convicted of a felony in the past five (5) years? * If yes, ex Do you have any relatives or personal friends working for the Company? If yes, who? Relationship: Have you ever been refused a fidelity bond? *The existence of any conviction of any crime does not constitute an automatic bar to emplication you need only disclose a felony conviction during the prior two (2) years. Motor Vehicle Operation If this box has been checked, your job requires the operation of a motor vehicle to you have a driver's license? Yes No If yes, answer the following que What state issued your driver's license? Driver's License Number:	Weekends? Holidays? lying, with or with- plain on this form. oyment consideration. In the	n Date		

Club Name:

Club Name:							
Application for Employment - Continued							
	S ofessional skills and/or certificates, lic specific, for example, typing 75 w.p.m						
Military Service							
Were you a member of the Have you obtained any so you have applied? Yes If yes, please describe:	pecial skills or abilities as a resul		please answer the fo				
Education							
School	City and State	# of Years Attended	Did you Graduate	Subjects Studied			
High School							
College							
College							
Trade / Business School							
Trade/ Business School							
Explanation for any section requiring further information:							
PLEASE READ THIS SECTION BEFORE YOU SIGN THIS EMPLOYMENT APPLICATION FORM. I certify that answers given in this application are true and complete to the best of my knowledge. I understand that any false statements on this application could result in disqualification from the application process or if employed separation from the Company. I understand the employer is not obligated to offer the position to me, even after completing this application or following a job interview. I understand the Company has certain rules and procedures, which must be followed. I agree that if I am employed I will follow the rules of the Company or be subject to disciplinary action that could mean dismissal. I understand the Company is an at-will employer, which means that any term of employment is for no definite period of time regardless of the date or payment of wages. If I am employed, such employment may be ended with or without cause or notice. No verbal agreements made during any application or interview process can be relied upon unless such agreements are in writing and signed by the owner or President of the Company including the at-will statement in this application. I understand if the Company hires me, my employment is conditional on my ability to provide proof of work authorization and identity as required by Federal Law and the completion of any post-employment requirements of the employer. Signature: Date:							
- g			24.0				