



APPLICATION FOR EMPLOYMENT AT SKATER'S CHOICE SKATE CENTER

Instructions for completing this employment application

1. Type or print in black ink
2. Complete each question thoroughly
3. Sign and date the completed application
4. Unanswered questions may lead to disregarding of application

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE
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PRESENT STREET ADDRESS	CITY	ZIP	BEST CONTACT NUMBER
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ARE YOU 18 YEARS OF AGE OR OLDER?	YES	NO
DO YOU HAVE RELIABLE TRANSPORTATION TO/FROM WORK?	YES	NO

HAVE YOU EVER BEEN CONVICTED OF ANYTHING OTHER THAN AN AUTOMOTIVE TRAFFIC VIOLATION?
YES NO

IF YES, PLEASE EXPLAIN:

DO YOU HAVE ANY RELATIVES OR FRIENDS EMPLOYED AT SKATER'S CHOICE?	YES	NO
NAME:	RELATIONSHIP:	
NAME:	RELATIONSHIP:	

YOUR CURRENT AVAILABILITY TO WORK IF HIRED:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
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DATE YOU ARE AVAILABLE TO BEGIN WORKING: _____

EDUCATIONAL HISTORY

SCHOOL TYPE	NAME AND LOCATION	MAJOR, DEGREE OR SPECIALTY	DID YOU GRADUATE?
HIGH SCHOOL			
COLLEGE			
OTHER TRADE SCHOOLS			

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LIST ANY HONORS, VOLUNTEER WORK, SCHOLARSHIPS OR ACHIEVEMENTS:

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PLEASE INDICATE ANY LANGUAGES YOU CAN READ AND WRITE FLUENTLY: _____

EMPLOYMENT HISTORY

THIS SECTION MUST BE COMPLETED

LIST MOST RECENT EMPLOYMENT FIRST

COMPANY NAME	LOCATION	PHONE NUMBER	DATE STARTED	DATE ENDED
REASON FOR LEAVING			PAY RATE BEGIN	PAY RATE END
COMPANY NAME	LOCATION	PHONE NUMBER	DATE STARTED	DATE ENDED
REASON FOR LEAVING			PAY RATE BEGIN	PAY RATE END
COMPANY NAME	LOCATION	PHONE NUMBER	DATE STARTED	DATE ENDED
REASON FOR LEAVING			PAY RATE BEGIN	PAY RATE END

PLEASE READ, SIGN AND DATE THE SKATER'S CHOICE SKATE CENTER ACKNOWLEDGMENT

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of Skater's Choice which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

Signature of Applicant

Date