

## Employment Application: Wisconsin Skate University DBA Incrediroll

Last Name		First Name			MI	May we perform a background check? [ ] Yes [ ] No		
Street Address			Apt. #	City		State	Zip Code	
Home Phone #		Referred By			Position Desired			
Full/Part Time (# of Hours)		Are you 18 or older? [ ] Yes [ ] No		If no, can you get a Permit? [ ] Yes [ ] No		Date of Birth		
<b>Hours Available</b>								
	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	Do you have reliable transportation? Yes No
From								
To								Can you work late nights? Yes No
<b>Education: Name &amp; Address of School</b>				Major		Diploma/Degree		
College								
High School								
Other								
<b>Employment (list most recent job first)</b>								
Company		Address			Supervisor			
Job Title		Phone # with area code (       )       -			From	To		
Reason for Leaving					Starting Pay	Ending Pay		
Company		Address			Supervisor			
Job Title		Phone # with area code (       )       -			From	To		
Reason for Leaving					Starting Pay	Ending Pay		
Company		Address			Supervisor			
Job Title		Phone # with area code (       )       -			From	To		
Reason for Leaving					Starting Pay	Ending Pay		
May we contact your present employer? [ ] Yes [ ] No								
Have you ever been convicted of a felony? [ ] Yes [ ] No				If yes, please explain.				
<p>I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information or material omission is ground for refusal to hire or dismissal regardless of when the falsification or omission is discovered. I authorize all of the individuals whom I have listed on this application to give any and all information regarding 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 or procuring such information. If I am employed, in consideration of my employment, I agree to conform to the rules and regulations of the Company. I acknowledge that these rules and regulations may be changed, withdrawn or added to by the company at its sole option and without any prior notice to me. I understand and agree that unless otherwise provided for under the terms of a collective bargaining agreement or other specific written employment agreement signed by an authorized executive of the Company, my employment, if I am hired, will be "at-will". This means that either the Company or I may terminate our employment relationship at any time, for any reason, with or without cause or prior notice.</p>								

Signature \_\_\_\_\_ Date \_\_\_\_\_