

APPLICATION FOR EMPLOYMENT



- DIRECTIONS:
- * Type or print, using black ink
 - * If you need additional space, attach a supplemental sheet
 - * Sign the completed application
 - * **MAIL TO 455 CHENIERE-DREW ROAD; WEST MONROE, LA 71291**

GENERAL

NAME (LAST)	(FIRST)	(MIDDLE)	SOCIAL SECURITY NO. <Bring if Interviewed>	DATE OF APPLICATION
PRESENT ADDRESS (STREET, CITY, STATE, ZIP CODE)			PHONE NUMBER to Contact	PHONE NUM - Alternate

IF HIRED, CAN YOU PROVIDE PROOF OF CITIZENSHIP OR RIGHT TO WORK? [] YES [] NO

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION? [] YES [] NO IF YES, PLEASE EXPLAIN.

DO YOU AUTHORIZE EXCALIBUR TO PERFORM A BACKGROUND CHECK USING THE INFORMATION PROVIDED IN THIS APPLICATION? [] YES [] NO

IF YOU ARE UNDER THE AGE OF 18, PROVIDE YOUR DATE OF BIRTH? ____/____/____

EDUCATION

DO YOU ATTEND OR PLAN TO ATTEND A SCHOOL, UNIVERSITY OR OTHER EDUCATIONAL FACILITY? [] YES [] NO

IF YES, PLEASE ENTER THE FULL NAME OF THE SCHOOL:

SCHOOL NAME: _____

EXPECTED DATE OF COMPLETION: ____/____/____

WHAT IS YOUR HIGHEST LEVEL OF EDUCATION COMPLETED (COMPLETE ALL THAT APPLY)?

ATTENDING HIGH SCHOOL CURRENT GRADE: _____	ATTENDING COLLEGE OR ENTERED IN AN EDUCATIONAL PROGRAM EXPLAIN: _____
HIGH SCHOOL DIPLOMA OR GED OR HIGHEST LEVEL COMPLETED: _____	ATTENDED COLLEGE OR OTHER EDUCATIONAL PROGRAM HIGHEST LEVEL OF COMPLETION: _____

LIST ANY SKILLS, TRAINING, LICENSES, OR AWARDS: _____

AVAILABILITY AND POSITION

POSITION APPLIED FOR: _____

DAYS AVAILABLE FOR WORK:	HOURS AVAILABLE	ADDITIONAL COMMENTS
MONDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	_____ _____ _____ _____ _____ _____
TUESDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	
WEDNESDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	
THURSDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	
FRIDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	
SATURDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	
SUNDAY: [] YES [] NO	ANYTIME: [] OR FROM: _____ TO _____	

EMPLOYMENT HISTORY

CURRENT/ PRIOR EMPLOYER	JOB TITLE	DATES EMPLOYED		PHONE	ADDRESS	SALARY	REASON FOR LEAVING
		FROM	THRU				

ARE THERE ANY EMPLOYERS THAT WE SHOULD NOT CONTACT IF WE PERFORM A BACKGROUND CHECK? IF SO, WHOM? _____

REFERENCES

NAME	RELATIONSHIP	PHONE	ADDRESS	COMMENTS

READ CERTIFICATION, SIGN AND DATE

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE

SIGNATURE	DATE
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NO PERSON SHALL BE DENIED EMPLOYMENT ON THE BASIS OF RACE, COLOR, ETHNICITY, NATIONAL ORIGIN, SEX/GENDER, SEXUAL ORIENTATION, RELIGION, CREED, DISABILITY. EXCALIBUR FAMILY ENTERTAINMENT CENTER IS AN EQUAL OPPORTUNITY EMPLOYER.