Employment Application									
APPLICANT INFORMATION									
Last Name	First Name		M.I.	Date					
Street Address			Apt./Unit#						
City		State	•	ZIP					
Phone ( )		E-mail Address							
Date Available	SSN #:	Date of Birth							
Are you 18 years or older? Yes	/ No	If not, what is your age?							
Are you a citizen of the U.S.?		If no, are you authorized to work in the U.S.?							
Yes / No		Yes / No							
Have you ever been convicted of a felony?		If yes, explain?							
Yes / No									
How will you get to work?									
Note: Age 16 or older preferred. Applicants age 16 or older will be hired first. We may have limited hours available for 15 years old. You must submit a written statement, signed by a parent or guardian, stating that they will provide on-time transportation to and from the corn maze. Submit statement at time of interview.									
EXPERIENCE									
Do you have experience working	with the public?	If yes, explain?							
Yes / No									
Do you have experience as	a cashier?	If yes, explain?							
Yes / No									
What experience do you have wor	king with children	and / or the public	-7						
What experience do you have wor	Will cilitaren	did / or the pastic							
EDUCATION									
School most recently attended?									
Last Grade completed (or if college- what is your ma		ajor?)	Grade	Major?					
REFERENCES				,					
Please list three personal referen	ces.								
1. Full Name			Relationship						
Address (if known)		Phone (	)						
2. Full Name			Relationship						
Address (if known)			Phone ( )						
3. Full Name			Relationship						
Address (if known)			Phone ( )						
PREVIOUS EMPLOYMENT - PROFESSIONAL REFERENCES (IF NONE, PLEASE WRITE "N/A")									
Most recent employment position	<u>.</u>								
Employer / Company Name			Phone ( )						
Address (if known)			Supervisor						
Job Title		From		То					
Responsibilities									
Reason for Leaving									
May we contact your previous supervisor for a reference? Yes / No									

PERSONAL									
How do you think your friends would describe you?									
What are your strengths?									
What are your weaknesses?									
What do you look forward to work	ing here at Glen R	ay's Corn Maze?							
Help us get to know you. Please s	elect the word / $\mu$	ohrase that best des	scribes you (ci	rcle one).					
- Reliable	- Bubbly		- Kind		- Life of the party				
- Hard working	- Analytical		- Shy		- Honest				
- Patient	- Reserved		- Quiet		- Self-motivated				
	12.11								
Are you able to lift and carry up to	o 40 lbs. (ie Pum	pkins)? Yes / No_	_						
POSITIONS									
Which 3 positions are you MOST in	terested in? (plea:	se circle choices)							
- Parking Lot	- Kiddie Corral /	Play Area	- Pumpkin Pa	tch / Cashier	- Ticket Booth				
Attendent	- Maze Greeter /	•	- Clean-up /		- Tractor Driver				
- Concessions	-Haunter for Fiel	d of Fright							
SCHEDULE									
Which days are you available betw	(oon (Sont 25 - O	ct 31 2020\2	Circlo da	ys - ( M, T, W,	Th F Call				
Willell days are you available betw	леен (зерt. 23 · О	ct. 31, 2020):	Circle da	ys - ( /vi,	111, 1, 3a )				
What hours are you available during	ng the week?								
What hours are you available on w	eekends?								
Are there any dates during the Fal	l Season (Sept. 25	- Oct. 31, 2020) th	at you are <u>NO</u>	T available?					
If Yes, please list days:									
If applying to be a haunter in the Fi	eld of Fright, haur	ited nights are as fo	llows: Sept 25	, 26 Oct 2, 3, 9,	10, 15, 16, 17, 23,				
24, 30, 31 Circle any days you are NOT available to work.									
PLEASE READ CAREFULLY - DISCL	AIMER AND SIGNA	TURE							
I authorize investigation of all stat	ements contained	I in this application.	. I understand	that the misre	presentation or				
omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references and others, and hereby									
release the Company from any liability as a result of such contract.									
Lalan wadanata adabat (1) Cananan		laabal aalia, that a							
I also understand that (1) Company has a drug and alcohol policy that may provide for pre-employment testing as well as testing after employment: (2) consent to and compliance with such policy is a condition of my employment; (3) I									
consent to not come to work impaired by alcohol or drugs, and (3) continued employment is based on the successful									
passing of testing under such policy. I further understand that continued employment may be based on the successful									
passing of job-related physical examinations.									
Signature				Date					
Signature	Date								
Signature of parent (if minor)	Date								
This Company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you									
					we assure you				
that your opportunity for employment with this company depends solely on your qualifications.  Thank you for completing this application form and for your interest in our business.									
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