



APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

Date of Application: _____

Name

First Middle Last

Present Address

Number Street City State Zip

Telephone (_____) _____ (_____) _____

Home Cell/Work/Other

Position(s) Applied For _____ Salary Desired _____ Date you Can Start _____

EMPLOYMENT RECORD: List all employment, beginning with most recent:

From: _____	To: _____	Employer (Company): _____	Phone: _____
Position: _____		Address (Street, City, State, Zip): _____	
Supervisor's Name: _____		Duties: _____	
Starting Salary/Wages: _____		_____	
Final Salary/Wages: _____		Reason for Leaving: _____	
From: _____	To: _____	Employer (Company): _____	Phone: _____
Position: _____		Address (Street, City, State, Zip): _____	
Supervisor's Name: _____		Duties: _____	
Starting Salary/Wages: _____		_____	
Final Salary/Wages: _____		Reason for Leaving: _____	
From: _____	To: _____	Employer (Company): _____	Phone: _____
Position: _____		Address (Street, City, State, Zip): _____	
Supervisor's Name: _____		Duties: _____	
Starting Salary/Wages: _____		_____	
Final Salary/Wages: _____		Reason for Leaving: _____	
From: _____	To: _____	Employer (Company): _____	Phone: _____
Position: _____		Address (Street, City, State, Zip): _____	
Supervisor's Name: _____		Duties: _____	
Starting Salary/Wages: _____		_____	
Final Salary/Wages: _____		Reason for Leaving: _____	

OTHER BUSINESS REFERENCES

Name Address or Company Phone Number

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	CITY/STATE	COURSE MAJORED IN	YEAR COMPLETED (CIRCLE)				GRADUATE? (CIRCLE)	
HIGH SCHOOL				9	10	11	12	YES	NO
COLLEGE				1	2	3	4	YES	NO
OTHER				1	2	3	4	YES	NO

Have you ever applied at Chacko's Family Bowling Center before? Yes No

Have you ever been employed at Chacko's Family Bowling Center before? Yes No

Referral Source: Advertisement Relative Friend Other: _____

Have you ever been convicted of a felony, misdemeanor or other crime? Yes No

(Conviction will not necessarily disqualify applicant from employment. Please exclude parking tickets or expired inspection sticker violations.)

If yes, state details and dates: _____

SCHEDULING:

Will you work: Full Time Part Time

List any days of the week or holidays that you will not be able to work: _____

Circle the hours beneath each day of the week that you are available for work. Selection may be impacted by availability.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:00 a.m.	8:00 a.m.	8:00 a.m.	8:00 a.m.	8:00 a.m.	8:00 a.m.	8:00 a.m.
9:00 a.m.	9:00 a.m.	9:00 a.m.	9:00 a.m.	9:00 a.m.	9:00 a.m.	9:00 a.m.
10:00 a.m.	10:00 a.m.	10:00 a.m.	10:00 a.m.	10:00 a.m.	10:00 a.m.	10:00 a.m.
11:00 a.m.	11:00 a.m.	11:00 a.m.	11:00 a.m.	11:00 a.m.	11:00 a.m.	11:00 a.m.
12:00 p.m.	12:00 p.m.	12:00 p.m.	12:00 p.m.	12:00 p.m.	12:00 p.m.	12:00 p.m.
1:00 p.m.	1:00 p.m.	1:00 p.m.	1:00 p.m.	1:00 p.m.	1:00 p.m.	1:00 p.m.
2:00 p.m.	2:00 p.m.	2:00 p.m.	2:00 p.m.	2:00 p.m.	2:00 p.m.	2:00 p.m.
3:00 p.m.	3:00 p.m.	3:00 p.m.	3:00 p.m.	3:00 p.m.	3:00 p.m.	3:00 p.m.
4:00 p.m.	4:00 p.m.	4:00 p.m.	4:00 p.m.	4:00 p.m.	4:00 p.m.	4:00 p.m.
5:00 p.m.	5:00 p.m.	5:00 p.m.	5:00 p.m.	5:00 p.m.	5:00 p.m.	5:00 p.m.
6:00 p.m.	6:00 p.m.	6:00 p.m.	6:00 p.m.	6:00 p.m.	6:00 p.m.	6:00 p.m.
7:00 p.m.	7:00 p.m.	7:00 p.m.	7:00 p.m.	7:00 p.m.	7:00 p.m.	7:00 p.m.
8:00 p.m.	8:00 p.m.	8:00 p.m.	8:00 p.m.	8:00 p.m.	8:00 p.m.	8:00 p.m.
9:00 p.m.	9:00 p.m.	9:00 p.m.	9:00 p.m.	9:00 p.m.	9:00 p.m.	9:00 p.m.
10:00 p.m.	10:00 p.m.	10:00 p.m.	10:00 p.m.	10:00 p.m.	10:00 p.m.	10:00 p.m.
11:00 p.m.	11:00 p.m.	11:00 p.m.	11:00 p.m.	11:00 p.m.	11:00 p.m.	11:00 p.m.
12:00 a.m.	12:00 a.m.	12:00 a.m.	12:00 a.m.	12:00 a.m.	12:00 a.m.	12:00 a.m.
1:00 a.m.	1:00 a.m.	1:00 a.m.	1:00 a.m.	1:00 a.m.	1:00 a.m.	1:00 a.m.
2:00 a.m.	2:00 a.m.	2:00 a.m.	2:00 a.m.	2:00 a.m.	2:00 a.m.	2:00 a.m.
3:00 a.m.	3:00 a.m.	3:00 a.m.	3:00 a.m.	3:00 a.m.	3:00 a.m.	3:00 a.m.

In compliance with Federal and State Equal Opportunity Laws, qualified applicants are considered for all positions applied for without regard to race, color, religion, sex, sexual orientation, national origin, age, marital status, or the presence of a medical condition or disability.

Are you aware of the essential job functions of the position you are applying for? Yes No

Can you perform the essential functions of this position? Yes No

Do you require a reasonable accommodation in order to perform the essential functions of this position? Yes No

IMPORTANT AGREEMENT: PLEASE READ THE FOLLOWING AND SIGN YOUR NAME BELOW.

I authorize Chacko's Family Bowling Center and/or Memory Lane Lounge (Company) to make such investigations and inquiries of my personal, employment or financial history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

I understand that unless otherwise prohibited by applicable law, I may be required at any time to submit to a drug and/or alcohol test as a condition of my employment with the Company. By accepting employment, I agree to submit to such a test as required by the Company, all at the Company's expense.

I understand that giving incomplete or false information in an application or interview for employment is a serious matter and is grounds for dismissal and forfeiture of related benefits. I understand that due to the character of our work at the Company, I must maintain a high level of security within the Company.

IN CONSIDERATION OF MY EMPLOYMENT, I agree to conform to the rules and regulations of the Company, and I understand that I can leave the Company with or without notice, and with or without cause; therefore, the Company reserves the same right. I understand that no manager or any company representative has authority to enter into any agreement to the contrary. I also understand that neither a Safety Manual, employee Handbook or any other Chacko's Family Bowling Center publication changes this at-will relationship.

I certify that answers given herein are true and complete to the best of my knowledge.

If my application is considered favorable, I will be available for work on: _____

Signature of Applicant: _____ Date: _____