



GERMAIN ARENA/KTB Florida Sports LLC
Application for Employment

-NAME:

A. Name: Last: _____ First: _____ Middle Initial: _____

B. Street Address: _____ Apartment: _____

City/State/Zip: _____

C. Telephone: Home: () _____ Work: () _____

D. How did you learn of the position? Newspaper [] TV [] Internet [] Other []

Other (Please Specify): _____

E. Have you ever applied with the Germain Arena/KTB Florida Sports before? Yes [] No []

If yes, when? _____ What position? _____

F. Have you ever worked for the Germain Arena/KTB Florida Sports before? Yes [] No []

If yes, when? _____ What position? _____

G. Do you have any relative(s) employed by the Germain Arena/KTB Florida Sports? Yes [] No []

If yes, give: Name: _____ Relationship: _____

H. Have you ever been convicted of a crime (other than minor traffic violations)? Yes [] No []

If yes, provide: Charge: _____ Place: _____

Date: _____ Result: _____

I. Are there any charges/indictments now pending against you? Yes [] No []

If yes, explain: _____

*NOTE: A "YES" answer to the two questions above will not necessarily bar you from employment. The nature, severity and date of the offense in relation to the position for which you are applying are considered.

Please Answer Questions J through M for Positions Requiring Driving Only:

J. Do you have a valid driver's license? Yes [] No [] State & License #: _____

K. Do you have a valid commercial driver's license? Yes [] No [] State & License #: _____

L. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes [] No []

If yes, provide details: _____

M. Has your license, permit or privilege ever been suspended or revoked? Yes [] No []

POSITION:

DATE:

Employment Data

A. Position applying for: _____

B. Minimum Acceptable Salary: \$ _____ /HOURLY \$ _____ /SALARY

C. Date you are available to start: _____

D. Would you accept: Full Time: Yes No

Part Time: Yes No AM PM

Temporary Yes No

Please indicate days available for work: (Include Nights)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Do you have transportation to and from work? Yes No

What hours are you available for work? From: _____ To: _____

If necessary, will you work overtime? Yes No

E. Please list any other pertinent experience, skills, training or volunteer experience that you have which are related to the position for which you are applying:

(Be sure to include any computer skills, cash handling, restaurant and retail experience!)

Education

	NAME	CITY/STATE	Choose Highest Year Completed	Did you Graduate?		DEGREE/MAJOR
				Yes	No	
HIGH SCHOOL				<input type="checkbox"/>	<input type="checkbox"/>	N/A
COLLEGE				<input type="checkbox"/>	<input type="checkbox"/>	
TECHNICAL				<input type="checkbox"/>	<input type="checkbox"/>	
OTHER				<input type="checkbox"/>	<input type="checkbox"/>	

Employment History

A. Are you presently employed? Yes No May we contact you at work? Yes No

B. Have you ever been discharged or forced to resign from any position? Yes No

If yes, please explain: _____

Instructions: READ CAREFULLY BEFORE COMPLETING THE REMAINDER OF THIS SECTION. IT IS IMPORTANT THAT THIS SECTION BE COMPLETED IN DETAIL IF YOUR EXPERIENCE IS TO BE FAIRLY EVALUATED.

1. Give specific information about the nature and responsibilities of each position you have held. Use a separate block for each position, even if it is with the same employer.
2. List all employment including military service, part-time and self-employment. Include all periods of unemployment except those during which you were a full-time student at an academic or technical institution.
3. **A RESUME MAY NOT BE SUBSTITUTED FOR THIS SECTION.** However, a resume may be attached upon full completion of this application.
4. Start with the most recent position and work back to first position you held.
5. If space is too limited for listing all your employment record, you may use an additional sheet of paper following the same format used on the next page. Sign/print your name and include with this application.

(1) Employer: _____ Phone Number: () _____
City: _____ State: _____ Position: _____
Dates of Employment: From _____ To _____ Salary: _____
Supervisor's Name: _____
Job Duties: _____
Reason for Leaving: _____ May We Contact This Employer? Yes No

(2) Employer: _____ Phone Number: () _____
City: _____ State: _____ Position: _____
Dates of Employment: From _____ To _____ Salary: _____
Supervisor's Name: _____
Job Duties: _____
Reason for Leaving: _____ May We Contact This Employer? Yes No

(3) Employer: _____ Phone Number: () _____
City: _____ State: _____ Position: _____
Dates of Employment: From _____ To _____ Salary: _____
Supervisor's Name: _____
Job Duties: _____
Reason for Leaving: _____ May We Contact This Employer? Yes No

Additional Comments/Information: Please use back sheets if necessary

Drug Free Workplace

References

List three (3) references. Do not include current or past employers, relatives or past/present employees of Germain Arena and the Florida Everblades. Provide full name, address (city & state) and phone number.

NAME	ADDRESS	PHONE NO.
1.		
2.		
3.		

Please Read the Following Statements Carefully and Sign

- Germain Arena/KTB Florida Sports LLC is an **Equal Opportunity Employer** and as such will recruit and hire employees without regard to race, religion, color, national origin, sex, age, political affiliation or disability except when physical condition is a *bona fide* occupational qualification.
- This application must be filled out in detail. Failure to complete all sections, or to sign this form, may result in its being returned for completion, causing delay or possible disqualification.
- This application will remain active for one (1) month from the date submitted.
- I understand and agree that acceptance of this application in no way obligates Germain Arena/KTB Florida Sports to employ me or that there are any positions available.
- As an applicant for employment with Germain Arena/KTB Florida Sports LLC, I have furnished information for use in determining my qualifications for employment. I hereby authorize the Company to conduct a thorough background investigation to further support the statements contained herein.
- I hereby release the Germain Arena/KTB Florida Sports LLC current and past employers and references named herein (or in accompanying resume), from liability or damage resulting from providing information requested.
- If I request herein that my present employer not be contacted, an offer of employment will be conditioned upon acceptable information and verification from such employer prior to beginning work.
- I agree to submit to a urine drug screen that is required for the position. The results of such analysis may be grounds for disqualifying me or terminating my employment.
- I agree to have a physical examination (company paid) as required for my position and understand that any offer of employment is contingent upon my passing this physical examination.
- I understand and agree that if employed, I will be an employee “at will” and will have the right to terminate my employment at any time, with or without notice and with or without cause, and that the Company shall have the same right.
- No supervisor or official is authorized to make an oral or written assurance or promise of continued employment.
- If employed, I agree to abide by all present and subsequently issued personnel policies and rules of the company.
- I understand that if hired, I must meet the eligibility verification requirements of the Federal Immigration and Naturalization Service and submit appropriate documentation to satisfy the requirements of completing INS Form I-9. (A list of acceptable documents is available through the Human Resources Department. However, the most commonly used ID is (1) a Passport or (2) a Social Security Card and a Driver’s License.)
- I hereby affirm that all statements made herein are true and correct to the best of my knowledge and understand that any misrepresentation may result in my being disqualified from further consideration or being terminated should I already be employed by Germain Arena/KTB Florida Sports LLC.
- My signature conveys that I have read, understand and agree to all the statements listed above.

Signature: _____

Date: _____

