



Shoreline Entertainment Complex

Employment Application

Applicant Information									
Full Name:					Date:				
Address:	Last	First		M	M.I.				
71001000.	Street Address		Aļ	Apartment/Unit #					
	City			St	ate ZIP	Code			
Phone:		E	E-mail Address:						
Date Available: : Social Securi				Desired	Salary: \$				
Position Applied for:YES				Last day available for work:					
Are you a citizen of the United States?			If no, are yo	ou authorized to	uthorized to work in the U.S.?				
Have you ever worked for this company?		YES NO		If yes, when?					
Have you ever been convicted of a felony?		YES NO							
If yes, explain:									
Education									
High School:		Addre	ess:						
From: _	To:	Did you gradua		NO NOT YET	Year:				
College:		Addre							
From: _	To:	Did you gradua		NO NOT YET	Degree:				
Other: _		Addre							
From: _	To:	Did you gradua		NO NOT YET	Degree:				
		Re	ferences						
Please list three professional references other than relatives or former employers, who are in a position and are willing to certify to your character, ability, experience and qualifications.									
Full Name: Relationship:									
Company:				Phone:					
Address:									
Full Name: Relationship:							_		
Company:			Phone:						
Address:									
Full Name:		Relationship:							
Company:				_ Phone:					
Address									

Previous Employment								
Company:	Phone:							
Address:	Supervisor:							
Job Title: Starting Salary:	\$	Ending Salary: \$						
Responsibilities:								
From: To: Reason for Leaving:								
May we contact your previous supervisor for a reference?	NO							
Company:	Phone:							
Address:	Supervisor:							
Job Title: Starting Salary:	\$	Ending Salary: \$						
Responsibilities:								
From: To: Reason for Leaving:								
May we contact your previous supervisor for a reference?	NO 🔲							
Company:	Phone:							
Address:	Supervisor:							
Job Title: Starting Salary:	\$	Ending Salary: \$						
Responsibilities:								
From: To: Reason for Leaving:								
May we contact your previous supervisor for a reference?	NO							
Military Service								
Branch:	From:	To:						
Rank at Discharge: Ty	Rank at Discharge: Type of Discharge:							
If other than honorable, explain:								
Disclaimer and Signature								
I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre- employment drug screen. I also understand that I may be subject to continuing drug and/or alcohol checks as a condition of ongoing employment. I hereby consent to a drug and/or alcohol screen as conditions of employment, if required.								
I certify that answers given herein are true and complete to the best of my knowledge. I understand that this application is not intended to be a contract of employment. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
I authorize investigations of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have and release all parties from all liability for the damages that may result from furnishing to you.								
I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.								
Signature:		Date:						