

## APPLICATION FOR EMPLOYMENT

**PERSONAL INFORMATION:**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ SOC SEC #: \_\_\_\_\_

Are you older than 18: Yes  No  Referred by: \_\_\_\_\_

How did you hear about this employment opportunity? \_\_\_\_\_

**AVAILABILITY:** Date you can start \_\_\_\_\_ Total hours available per week: \_\_\_\_\_

Hours Available:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

**EMPLOYMENT HISTORY:** (If not applicable, list work performed as a volunteer or personal references. Please attach a separate list of employers if more space is needed.) May we contact your present employer? Yes  No

1) Company \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_ Job Responsibilities \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates Worked: From: \_\_\_\_\_ To: \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

2) Company \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_ Job Responsibilities \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates Worked: From: \_\_\_\_\_ To: \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

3) Company \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_ Job Responsibilities \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates Worked: From: \_\_\_\_\_ To: \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**SCHOOL MOST RECENTLY ATTENDED:**

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_  
Last Grade Attended \_\_\_\_\_ Graduated? Yes  No  Now Enrolled? Yes  No

**REFERENCES:** Give the names of three persons not related to you whom you have known at least one year.

Name \_\_\_\_\_  
Address: \_\_\_\_\_ City/State \_\_\_\_\_  
Phone # \_\_\_\_\_ Business \_\_\_\_\_ Years Acquainted \_\_\_\_\_

Name \_\_\_\_\_  
Address: \_\_\_\_\_ City/State \_\_\_\_\_  
Phone # \_\_\_\_\_ Business \_\_\_\_\_ Years Acquainted \_\_\_\_\_

Name \_\_\_\_\_  
Address: \_\_\_\_\_ City/State \_\_\_\_\_  
Phone # \_\_\_\_\_ Business \_\_\_\_\_ Years Acquainted \_\_\_\_\_

**GENERAL:** What other relevant experience or training have you had and what other activities are you involved in?

\_\_\_\_\_  
\_\_\_\_\_

DURING THE PAST 5 YEARS, HAVE YOU EVER BEEN CONVICTED OF, PLED GUILTY TO OR PLED NO CONTEST TO A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS? YES  NO

Answering yes will not necessarily bar you from employment. Applicants are not required to disclose sealed or expunged conviction records or the existence of such records.

ARE YOU OR HAVE YOU EVER BEEN A SEX OFFENDER REGISTERED WITH ANY FEDERAL, STATE OR LOCAL GOVERNMENT AGENCY, INCLUDING ANY LISTING ON A PUBLIC WEBSITE? YES  NO

**IN CASE OF EMERGENCY, NOTIFY:** \_\_\_\_\_

ADDRESS, CITY/STATE \_\_\_\_\_ PHONE \_\_\_\_\_

US laws require that, if hired, you must furnish appropriate documentation establishing identity and employment eligibility.

I certify that I have read this application and the information on it is complete and correct. I understand that any commissions or misrepresentation of the information is grounds for dismissal. If I am employed, in consideration of my employment, I agree to above by all rules and policies of the Company. I also agree that the duration of my employment will not be for any specified term and may be terminated by me at will or at the will of the Company with or without notice, at any time.

I authorize any persons, employers, schools and organizations listed on this application to give you any information concerning my employment and other pertinent information they may have, personal or otherwise, and release all parties from all liability and damages that may result from furnishing this to you.

Fireworks Over America is an Equal Opportunity employer. Various federal, state and local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability or veterans status, or other categories protected by law. It is Fireworks Over America’s policy to comply fully with these laws, as applicable, and information requested on this application will not be used for any purpose prohibited by law.

Signature \_\_\_\_\_ Date \_\_\_\_\_