



# Application For Employment

Lost Worlds Adventures is an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name \_\_\_\_\_

Address _____		City _____	State _____	Zip _____
How long at this current address? _____		Are you over 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/> Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>		
Phone Number _____	Mobile Number _____	Email Address _____		
Have you worked for this company in the past? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when? _____		Names of friends or family who currently work for this company: _____		
Are you a U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>		_____		
If selected for employment, are you willing to submit to a pre-employment drug screening test? Yes <input type="checkbox"/> No <input type="checkbox"/>				

## Emergency Contact Information

Name: _____	Home Phone: _____
Address: _____	Work Phone: _____
City: _____ State: _____	Zip: _____
How is this person related to you? _____	
Name: _____	Home Phone: _____
Address: _____	Work Phone: _____
City: _____ State: _____	Zip: _____
How is this person related to you? _____	

## Position

Position you are applying for _____	Available start date _____	Desired pay _____
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal/Temporary		

## Shift Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From _____							
To _____							

## Previous Employment

Company:		Position:	Starting salary:
Date Started:	Date Ended:	Reason for leaving:	Ending salary::
Supervisor's name:		May we contact this employer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Job responsibilities:			

Company:		Position:	Starting salary:
Date Started:	Date Ended:	Reason for leaving:	Date Started:
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## Training Required for Previous Jobs

Type of Training	Location	Dates

## General Information

List any foreign languages that you speak and indicate your level of fluency:

Fluent  Minimal  Read  Write

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List any special skills and abilities you have that can be applied to this position:

## Military History

Have you served in the military? Yes  No

Branch of Service:

Served from:

To

Discharge date:

Rank:

Do you have any military commitment, including National Guard Service, which would influence your work schedule?

Yes  No

If so, please explain:

Are you a Vietnam veteran? Yes  No

Are you a disabled veteran? Yes  No

Are you a special disabled veteran? Yes  No

**REASONABLE ACCOMMODATIONS:** In the event you believe you will need reasonable accommodations to assist you in performing your job, please contact your supervisor or human resources coordinator.

## Additional Information

## Signature Disclaimer

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)

Signature

Date



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