

# Plaza Lanes

An Equal Opportunity Employer

## Application for Employment

Employees of Plaza Lanes and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, gender or age.

As a means of accommodation to persons with specific disabilities that prevent them from completing this application, confidential assistance in filling out this application may be obtained by calling 304-752-1162

Position applied for: \_\_\_\_\_

Home Phone \_\_\_\_\_

Social Security No: \_\_\_\_\_

Cell \_\_\_\_\_

Full Legal Name \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_

Drivers Lic # \_\_\_\_\_

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

## Education

Highest grade completed \_\_\_\_\_ Year Completed \_\_\_\_\_

If you did not complete high school, do you have a high school equivalency diploma? \_\_\_\_\_ Date Received \_\_\_\_\_

Numbers of years of post high school education \_\_\_\_\_

Name and Location of Institution	Major or Specialty	Dates Attended

If you expect to complete an educational program in the near future, please indicate what type of degree or program and expected completion date: \_\_\_\_\_

\_\_\_\_\_



# Experience

Starting with the most recent, describe all paid, military and applicable voluntary experience. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position. You may list significantly different jobs within the same organization as separate items.

May we contact your present supervisor? \_\_\_\_\_

Job Title \_\_\_\_\_ Duties: \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Equipment used \_\_\_\_\_

Salary (start) \$ \_\_\_\_\_ (finish) \$ \_\_\_\_\_

Dates of employment \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Your name, if different from present \_\_\_\_\_

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Job Title \_\_\_\_\_ Duties: \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Equipment used \_\_\_\_\_

Salary (start) \$ \_\_\_\_\_ (finish) \$ \_\_\_\_\_

Dates of employment \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Your name, if different from present \_\_\_\_\_



Job Title \_\_\_\_\_ Duties: \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Immediate Supervisor \_\_\_\_\_ Equipment used \_\_\_\_\_  
 Salary (start) \$ \_\_\_\_\_ (finish) \$ \_\_\_\_\_  
 Dates of employment \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_  
 Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Your name, if different from present \_\_\_\_\_

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Job Title \_\_\_\_\_ Duties: \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Immediate Supervisor \_\_\_\_\_ Equipment used \_\_\_\_\_  
 Salary (start) \$ \_\_\_\_\_ (finish) \$ \_\_\_\_\_  
 Dates of employment \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_  
 Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Your name, if different from present \_\_\_\_\_

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Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops, social achievements or specialized skills. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Typing speed \_\_\_\_\_ words per minute. Shorthand speed \_\_\_\_\_ words per minute

License Type	License Number	Expiration Date	Granted By

# References

Name	Address	Phone	Relationship

# Miscellaneous

What shift are you available to work? \_\_\_\_\_ Full or Part-time? \_\_\_\_\_

What days are you available to work? \_\_\_\_\_

For purposes of compliance with the immigration Reform and Control Act, are you eligible for employment in the United States? **YES** or **NO** Under the immigration Reform and control act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.

Have you ever been convicted of a law violation (s), including moving traffic violations but excluding offenses committed before you eighteenth birthday which were finally adjudicated in a Juvenile Court or under a youth offender law? **YES** or **NO**

**If yes, list all and explain.** \_\_\_\_\_

When will you be available to start work? \_\_\_\_\_

I hereby certify that all entries on this document are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the service of Plaza Lanes. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize Plaza Lanes to rely upon and use, as it sees fit, any information received from such contacts. Information contained on this application may be disseminated to other agencies, or systems on a need-to-know basis for good cause shown as determined by the agency head or designee.

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

