



# APPLICATION FOR EMPLOYMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY ♦ WE ARE AN EQUAL OPPORTUNITY EMPLOYER

GENERAL INFORMATION

Last Name		First		Middle		Date Of Application / /	
Current Address No.		Street		City		State	Zip Code
Telephone No.		Social Security No.		Have You Ever Wokred In A Bowling Center? Y / N		Where:	
Position Applying For:		Are You Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are You A U.S. Citizen Or Do You Hold A U.S. Permanent Residence Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Type Of Employment Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/> Summer		Shifts Willing To Work: <input type="checkbox"/> Evening <input type="checkbox"/> Rotating <input type="checkbox"/> Day <input type="checkbox"/> Night		Will You Work <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays		Are You 18 Yrs Of Age Or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No Are You 21 Yrs Of Age Or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do You Have Any Relative Employed By Our Company? <input type="checkbox"/> Yes Name: <input type="checkbox"/> No Position:		Who Referred You To Our Company? <input type="checkbox"/> Ad <input type="checkbox"/> Friend <input type="checkbox"/> Agency <input type="checkbox"/> Self <input type="checkbox"/> Other:		Do You Bowl? <input type="checkbox"/> Yes <input type="checkbox"/> No Indicate League(s) And Average(s):			
If There Are Any Positions Or Job Duties Which You Are Unable To Perform Due To a Physical, Mental Or Medical Disability - Please Describe:				Have You Ever Been Convicted Of A Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Please Specify: (A Conviction Record Will Not Necessarily Be A Bar to Employment - All Factors Involved Will Be Considered)			
Extra-Curricular Activities (Scholastic or Athletic):				Special Interests, Hobbies, Professional Organization:			

EDUCATION

School	Name And City Of School		Course Of Study	Circle Last Year Completed	Did You Graduate	List Diploma Or Degree
High School				1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Or Trade School				1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College Or University				1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School Or Other				1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Military Service	Service Branch	From	To	Please List Job Related Military Skills Of Experience:		
Are You Attending School Now? <input type="checkbox"/> Yes <input type="checkbox"/> No			Do You Plan Further Education Study? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Where:			When: What Field			

Starting With Present Or Most Recent, List Previous Employers. List Only Employers Located Within The United States. Include Self-Employed, Summer And Part-Time Jobs.  
If You Need More Space Please Continue On A Separate Sheet

EMPLOYMENT HISTORY

From Month/Year	To Month/Year	Employer Name:	Pay Rate	Describe Duties Performed
		Address	Position	
Reason For Leaving:		City - State - Zip	Supervisor	
From Month/Year	To Month/Year	Employer Name:	Pay Rate	Describe Duties Performed
		Address	Position	
Reason For Leaving:		City - State - Zip	Supervisor	
From Month/Year	To Month/Year	Employer Name	Pay Rate	Describe Duties Performed
		Address	Position	
Reason For Leaving:		City - State - Zip	Supervisor	
From Month/Year	To Month/Year	Employer Name	Pay Rate	Describe Duties Performed
		Address	Position	
Reason For Leaving:		City - State - Zip	Supervisor	

If You Are Employed, May We Contact Your Present Employer? ☐ Yes ☐ No

SKILLS

Check Kinds Of Related Work In Which You Have Experience

Accounting/Bookkeeping	Marketing/Sales	Filing	Custodial
Bar / Food Service	Payroll	Data/Word Processing	Mechanic - Brunswick
Cashier	Supervising	Typing Secretarial	Mechanic - AMF
Customer Service	Purchasing	Pinjumber/Pinchaser	Maintenance

Please Provide Details:

Are There Any Other Experiences, Skills Or Qualifications Which You Feel Would Especially Qualify You For Work With Our Organization?

READ CAREFULLY BEFORE SIGNING:

I voluntarily authorize a thorough investigation of my past employment and education and agree to release from all liability or responsibility all persons or organizations supplying such information. I also agree that the company shall not be liable in any respect if my employment is terminated because of false statement, answers or purposeful omissions by me in this application. I understand that all employment opportunities are for not definite period and may, regardless of the date of payment of employee's wages and salary be terminated at any time without prior notice.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. Bowling Personnel Development Service assumes no responsibility for the inclusion in said form of any questions which, when asked by the prospective employer of the job applicant, may violate state and/or Federal law.