



# Morey Courts Recreation Center

## APPLICATION FOR EMPLOYMENT

(Please complete fully and only submit information specifically requested)

Mail To:  
 Director  
 P.O. Box 1006  
 Mt. Pleasant, MI 48804

### PERSONAL INFORMATION

NAME (LAST NAME, FIRST NAME)		DATE:	
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER ( ) --	EMAIL ADDRESS		
ALTERNATE PHONE ( ) --	REFERRED BY		
HAVE YOU EVER BEEN <u>CONVICTED</u> OF A CRIMINAL OFFENSE OTHER THAN MINOR TRAFFIC VIOLATIONS? (Answering yes does not disqualify applicant from employment consideration; each situation will be evaluated based on circumstances and desired position) <input type="checkbox"/> YES (ATTACHED DETAILED DESCRIPTION) <input type="checkbox"/> NO			

### EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	WAGE DESIRED /HR	DESIRED HOURS PER WEEK
ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		
HAVE YOU APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU HAVE SKATING AND/OR HOCKEY EXPERIENCE? (NOT REQUIRED) <input type="checkbox"/> YES (PLEASE DESCRIBE BELOW) <input type="checkbox"/> NO _____		

### AVAILABILITY      LIST BELOW THE DAYS & TIMES WHICH YOU ARE AVAILABLE TO WORK

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
OTHER ACTIVITIES:						

### EDUCATION

NAME & LOCATION OF SCHOOL	YEARS	DEGREE	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE/CORRESPONDENCE/OTHER			
U.S. MILITARY SERVICE		RANK	

(CONTINUED ON OTHER SIDE)

**EMPLOYMENT HISTORY** LIST BELOW LAST THREE EMPLOYERS, BEGINNING WITH CURRENT OR MOST RECENT

DATES (MO/YR)		EMPLOYER NAME & ADDRESS	POSITION	SALARY	REASON FOR LEAVING
FROM	TO				

**REFERENCES** LIST THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	RELATIONSHIP	FULL ADDRESS	PHONE

**AUTHORIZATION**

I certify that all information contained on this application is true and complete to the best of my knowledge and understand that if employed, falsified statements shall be grounds for dismissal. I further understand that employment with Morey Courts Recreation Center and the Central Sports and Recreation Center (CSRC) is at will and can be terminated at any time by either the employer or employee.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Morey Courts Recreation Center and the CSRC from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of Morey Courts Recreation Center and the CSRC has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

<b>OFFICE USE ONLY – DO NOT WRITE IN THIS AREA</b>			
INTERVIEW DATE _____		BY _____	
APPEARANCE	CHARACTER	PERSONALITY	ABILITY
REMARKS			
RECOMMENDATION		POSITION	WAGE