

# APPLICATION FOR EMPLOYMENT



**The Air Zoo®**  
**Application for Employment**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FOR POSITION

\_\_\_\_\_  
NAME (LAST, FIRST, MI)

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIPCODE

\_\_\_\_\_  
TELEPHONE (HOME)

\_\_\_\_\_  
TELEPHONE (CELL)

\_\_\_\_\_  
Email address

If hired when can you begin? \_\_\_\_\_

Are you legally entitled to work in the U.S.?  Yes  No

Are you 18 years or older?  Yes  No

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**EDUCATION** (please begin with most recent)

\_\_\_\_\_  
SCHOOL

\_\_\_\_\_  
YEARS ATTENDED

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DEGREE/MAJOR

\_\_\_\_\_  
CITY, STATE, ZIPCODE

Did you graduate?  Yes  No

\_\_\_\_\_  
TELEPHONE

\_\_\_\_\_  
SCHOOL

\_\_\_\_\_  
YEARS ATTENDED

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DEGREE/MAJOR

\_\_\_\_\_  
CITY, STATE, ZIPCODE

Did you graduate?  Yes  No

\_\_\_\_\_  
TELEPHONE

Do you have US Military experience?  Yes  No

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

Branch: \_\_\_\_\_

Rank: \_\_\_\_\_

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

Please provide any additional information such as special skills, training, management experience, equipment operation or qualifications you feel will be helpful to us in considering your application.

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**CURRENT AND FORMER EMPLOYERS** (please begin with most recent)

COMPANY

POSITION

ADDRESS

SUPERVISOR

CITY, STATE, ZIPCODE

DATES EMPLOYED

TELEPHONE

REASON FOR LEAVING

COMPANY

POSITION

ADDRESS

SUPERVISOR

CITY, STATE, ZIPCODE

DATES EMPLOYED

TELEPHONE

REASON FOR LEAVING

COMPANY

POSITION

ADDRESS

SUPERVISOR

CITY, STATE, ZIPCODE

DATES EMPLOYED

TELEPHONE

REASON FOR LEAVING

Are you currently employed?  Yes  No

May we contact your current employer?  Yes  No

**REFERENCES** (please list three professional – no friends or relatives)

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NAME	ADDRESS	PHONE	RELATIONSHIP
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NAME	ADDRESS	PHONE	RELATIONSHIP
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NAME	ADDRESS	PHONE	RELATIONSHIP
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**Please read the following statement carefully before signing to indicate your understanding.**

I verify that the information given by me in this application is true, accurate and complete. I understand that if I have given any false information on this application, or in an interview, or if I have omitted any material facts, I may be disqualified from employment with the company, or if hired, I may be discharged immediately upon discovery of such false statements or omissions, regardless of how much time has passed between the date of my hire and the discovery of such misrepresentations.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated with or without cause, at any time, with or without notice.

I understand that if hired, my employment is at will, meaning that either the employer or I may terminate the employment relationship at any time with or without notice and with or without cause. This provision supersedes any oral or written representations to the contrary, unless the written statement is signed by the Executive Director of the Company.

I authorize investigation of all statements contained in this application for any employment-related purpose. I release the listed references and all employers, except those specifically excepted\*, to provide you with any and all applicable information they may have. I hereby release these references and former employers from all liability for any information they may give to the Company. I understand I will be requested to complete a Background Check Authorization form if considered for employment and authorize the Air Zoo to verify the information I have provided and to make any investigations of my background deemed necessary, both at the time of application and later during my employment, if I am hired. I also waive all written notice from all prior employers related to providing such information.

In consideration of my employment, I agree to conform to the rules and policies of the Air Zoo.

This application for employment shall be considered active for 90 days. If I wish to be considered for employment after that time period, I understand that I must inquire at that time whether or not applications are being accepted.

My signature below indicates that I have read and understood the above paragraphs.

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SIGNATURE OF APPLICANT

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DATE

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PRINT FULL NAME

\* Employers specifically excepted: \_\_\_\_\_

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# Availability

Please mark the days you are available to work. Ride operator and ticket shifts are 8:45 to 5:15.

Name \_\_\_\_\_

Sunday \_\_\_\_\_

Monday \_\_\_\_\_

Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_

Thursday \_\_\_\_\_

Friday \_\_\_\_\_

Saturday \_\_\_\_\_

Start Date \_\_\_\_\_