



## EMPLOYMENT APPLICATION

An equal opportunity employer.  
 Applicable Law & company policy prohibits  
 discrimination based on race, religion, color,  
 age, sex, national origin or physical disability.

Please Print:

Name - Last	First	Middle	Social Security Number
Address - Number & Street		City	Zip Code
Telephone Number			

Are you over 18 years old? Yes No    If you are under 18, can you submit a work permit if offered a job? Yes No  
 What position are you applying for: \_\_\_\_\_

### DAYS AND HOURS AVAILABLE:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

### EMPLOYMENT HISTORY

Dates Employed			Company Name-Address	Position - Supervisor's Name	Reason for Leaving	Last Rate of Pay
Most Recent	First					
From To	Mo Yr		Company Street City			
From To	Mo Yr		Company Street City			
From To	Mo Yr		Company Street City			
From To	Mo Yr		Company Street City			

### PROFESSIONAL OR BUSINESS REFERENCES

Name	Address	Telephone	# years known

IN CASE OF EMERGENCY PLEASE NOTIFY: \_\_\_\_\_ at this number \_\_\_\_\_

### IMPORTANT NOTICE - PLEASE READ AND SIGN

1. I declare that all statements and answers given in this application are true and complete. I understand and agree that any untruth, misleading answer, omission, concealment or failure to answer any question fully, completely and accurately will be grounds for terminating my employment.
2. I authorize Wild Country and any Wild Country agent to investigate my references, to communicate with my former employers concerning the same, and to make an independent investigation of my character, conduct and employment record and to keep and preserve records of such investigations.
3. I agree that upon termination of my employment I will return all company property and materials in my possession.
4. I agree to submit to a physical examination if requested by Wild Country. Wild Country shall designate the physician and shall also pay the examination expense. A physical examination may be requested prior to acceptance of employment or at any subsequent intervals after employment is granted. The purpose of such examination (or examinations) will determine my physical fitness to begin or continue employment with Wild Country.
5. If employed I agree to read and comply with all Company rules, regulations and policies.
6. I agree that if employment is offered and accepted by me, it is mutually understood that any employment is not confined to a fixed term and may be ended by either party without prior notice, unless otherwise affected by written policies.
7. I understand that Federal Law prohibits employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization. Failure to submit such proof within required time will result in immediate termination.

Signature of Applicant

Date