

AMERICAN OBSTACLE INC

Play at the Extreme

7859 South Rt.37 Kinmundy, IL.

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE PAGES 1-4

Name: _____ Date: _____

Address: _____

How long at this address? _____

Telephone: () _____ Cell Phone: _____ E-mail: _____

List age if under 18: _____

Position applying for: 1) _____ 2) _____

Salary desired: _____

How many hours can you work per week? _____

Employment desired? Full time

Part time

Can you work overtime? Yes No

Are you comfortable working at heights? Yes No

Are you comfortable working in or around water? Yes No

Days available to work/times available		Months available to work	
All Days	Any Hours	All Months	
Monday		January	July
Tuesday		February	August
Wednesday		March	September
Thursday		April	October
Friday		May	November
Saturday		June	December
Sunday			

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Other Education				

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HAVE YOU EVER BEEN CONVICTED OF A CRIME? Yes No

If yes, explain all convictions, nature of offenses leading to convictions, date of convictions, where committed, sentences imposed, and type of rehabilitation. Use back of this sheet if not enough room.

MILITARY

Have you ever been in the Armed Forces? Yes No Are you currently in the National Guard? Yes No

Specialty: _____ Date entered: _____ Discharge date: _____

WORK EXPERIENCE

Please list your work experience beginning with your most recent job held, including self employment.

Attach additional sheets or a resume if necessary.

Name of Employer: _____ Name of Supervisor: _____

Address: _____ Employed from: _____ to _____

Pay or salary starting: _____ Final: _____

Telephone number: _____ Your last job title: _____

Specific reason for leaving: _____ May we contact supervisor for reference? Yes No

List the positions you held, duties performed, skills used or learned, advancements or promotions earned while at this job:

Name of Employer: _____ Name of Supervisor: _____

Address: _____ Employed from: _____ to _____

Pay or salary starting: _____ Final: _____

Telephone number: _____ Your last job title: _____

Specific reason for leaving: _____ May we contact supervisor for reference? Yes No

List the positions you held, duties performed, skills used or learned, advancements or promotions earned while at this job:

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Work history continued:

Name of Employer: _____ Name of Supervisor: _____

Address: _____ Employed from: _____ to _____

Pay or salary starting: _____ Final: _____

Telephone number: _____ Your last job title: _____

Specific reason for leaving: _____ May we contact supervisor for reference? Yes No

List the positions you held, duties performed, skills used or learned, advancements or promotions earned while at this job:

Do you have a valid driver's license? Yes No

What is your means of transportation to work? _____

Is there any physical disability that would prevent you from fully performing the duties of the job for which you are applying?

(Each position requires a different level of physical abilities.) Yes No

Describe if yes: _____

List two personal references below:

Name of Reference: _____

Company Name: _____

Address: _____

Telephone Number: () _____

Name of Reference: _____

Company Name: _____

Address: _____

Telephone Number: () _____

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An application form sometimes does not have space for an individual to adequately summarize a complete personal background. Use the space below to tell us any additional information that might be useful in describing your qualifications for the specific position(s) which you are applying for. Also include some of your hobbies, or pastimes that you enjoy.

I understand that I am applying for a physically demanding job that requires a lot of climbing at heights and may be required to fill out a health questionnaire and/or a medical examination as a part of employment.

I understand that American Obstacle has a drug and alcohol policy that requires pre-employment testing as well as random testing during employment. Consent to and compliance with this policy is a condition of my employment.

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information on my application or interview may result in my release.

Signature _____ **Date** _____
If typing your name for email submission, you verify that you are doing so as a legal signature by doing so.

Mail applications to: American Obstacle at PO Box 135 Kinmundy, IL 62854