

Employment Application

Gameday Detroit is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.



PERSONAL INFORMATION

Name (Last)	(First)	(Middle)	Social Security No.
Home Address			City State Zip Code
Cell Phone No. ()	Home Phone No. ()	Email Address	
Position(s) Applied for:			Date Available: / /

How did you hear about us?

- Online
 Employment Agency
 Current Employee: _____
 Other: _____

Are you legally eligible to work in the United States? *(Proof of eligibility will be required upon offer of employment.)* YES NO

Are you over the age of 18 years? *(If no, you may be required to provide authorization.)* YES NO

Have you ever applied to Gameday Detroit before? *If yes, provide date: / /* YES NO

Have you ever worked for Gameday Detroit before? *If yes, provide date: / /* YES NO

Have you ever been convicted of a felony? *(A conviction will not necessarily disqualify you.)* YES NO

If yes, please explain: _____

Is anyone related to you employed by Gameday Detroit? YES NO

If yes, please give their name and relationship to you: _____

DAYS AVAILABLE

Day	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
AM							
PM							

Describe any special training, apprenticeships, licenses or skills: _____

Have you received any job-related training in the United States Military?

Please give dates and explanation: _____

EDUCATION

Type of School	Name and Location of School	Degree/Area of Study	Number of Years Attended	Graduated(check yes or no)
High School				<input type="checkbox"/> YES <input type="checkbox"/> NO
College				<input type="checkbox"/> YES <input type="checkbox"/> NO
Graduate School				<input type="checkbox"/> YES <input type="checkbox"/> NO
Other				<input type="checkbox"/> YES <input type="checkbox"/> NO

EMPLOYMENT HISTORY *(Begin with current or most recent employer.)*

May we contact present employer? YES NO May we contact past employer? YES NO

From: ____/____ mo. yr.	Name	Your Job Title
To: ____/____ mo. yr.	Address City	Name of Supervisor
	State Phone	Starting Salary: Ending Salary:

List Major Duties: _____

Reason for leaving: _____

From: ____/____ mo. yr.	Name	Your Job Title
To: ____/____ mo. yr.	Address City	Name of Supervisor
	State Phone	Starting Salary: Ending Salary:

List Major Duties: _____

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	State Phone	Starting Salary: Ending Salary:

List Major Duties: _____

Reason for leaving: _____

REFERENCES *(Please list three persons, who are not related to you or previous supervisors, who can provide business references.)*

Name	Address	Work Phone No.	Relationship/Occupation	Years Known

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery. I understand that receipt of this application does not imply employment and that this application and/or any Gameday Detroit documents are not contracts of employment.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature

Date