



## KANE COUNTY COUGARS

### Hourly or Seasonal Employment Application

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

PERSONAL	PLEASE PRINT				
<b>NAME</b>					
<b>ADDRESS</b>					
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>			
<b>PRIMARY PHONE</b>	<b>SECONDARY PHONE</b>	<b>EMAIL ADDRESS</b>			
<b>BIRTHDATE</b>					
Have you ever worked for the Cougars Before?    YES    NO    IF YES, when? _____					
Were you referred to the Cougars by a current employee?    YES    NO    IF YES, by whom? _____					
Are you currently employed?    YES    NO					
In case of emergency, who should we notify?    Name _____    Phone _____					
<b>POSITION APPLYING FOR (circle one):</b>	<b>USHER</b>	<b>STRIKEZONE</b> <small>(Server Experience Required)</small>	<b>PARKING</b>		
<b>START DATE</b> _____	<b>COOK</b>	<b>CASHIER</b>	<b>BEER SERVER</b>		
	<b>PICNIC SERVER</b>	<b>FOOD RUNNER</b>	<b>CONCESSION STAND MGR.</b>		
	<b>STADIUM VENDOR</b>	<b>KIDZONE</b>	<b>SUITE ATTENDANT</b> <small>(Server Experience Required)</small>		
	<b>PROMOTIONS</b>	<b>OTHER</b> _____			
<b>EMPLOYMENT HISTORY</b> <i>List from most recent backwards...</i>					
<i>DATES</i>	<i>COMPANY</i>	<i>POSITION</i>	<i>PHONE/SUPERVISOR NAME</i>	<i>PAY RATE</i>	
<b>EDUCATION</b>					
<b>Circle Highest Grade Completed:</b>	<b>High School</b>	9	10	11	12
	<b>College, Trade or Business</b>	1	2	3	4
<i>SCHOOL</i>	<i>LOCATION</i>	<i>AREA OF STUDY</i>	<i>DEGREE/DIPLOMA</i>	<i>GRADE POINT AVG.</i>	
High School					
College/University					
Vocational, Business, Other					

**GENERAL**

May we contact your current employer for references?	YES	NO
Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by court? (A "Yes" response does not automatically disqualify your application)	YES	NO
We require our employees to "clean as you go," to mop floors, exhibit exemplary customer service and work in a fast-paced environment. Are you willing to go along with this?	YES	NO
Have you ever handled cash for a business?	YES	NO
If so, were you ever disciplined for your cash handling?	YES	NO

**CERTIFICATION**

The above information is true and correct. I understand that, in the event of my employment by the Kane County Cougars, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Kane County Cougars to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Kane County Cougars and will hold the Cougars and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize the Kane County Cougars to obtain any credit and consumer check.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Kane County Cougars is intended to create an employment contract between myself and the Cougars under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Kane County Cougars at any time and for any reason. I understand that only the General Manager may make any contrary commitments.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

_____	_____
<b>Signature</b>	<b>Date</b>

**DISABILITIES**

Do you have any physical or mental impairments that limit one or more of your major life activities (e.g., walking, hearing, speaking, seeing, breathing, lifting, learning) ? (Circle one)

**YES**

**NO**

**FOR EMPLOYER USE ONLY**

Date to Start	_____
Position	_____
Rate of Pay	_____
Comments	_____ _____ _____