

HALL ENTERTAINMENT SECURITY INC. - APPLICATION FOR EMPLOYMENT

Mail: Hall Entertainment Security | 1695 Vernon Odom Blvd. | Akron, OH 44320 *or* FAX #: 330-745-6455

NAME: LAST FIRST

PRESENT ADDRESS APT. NUMBER CITY STATE ZIP CODE

ARE YOU 20 YEARS OLD OR OLDER? YES ___ NO ___

PHONE #: _____ EMAIL ADDRESS: _____

POSITION SECURITY ___ STAFF ___ USHER ___ DATE YOU CAN START _____

EDUCATION

SCHOOL LEVEL NAME & LOCATION NO. YEARS ATTENDED DID YOU GRADUATE?

HIGH SCHOOL COLLEGE

NAME OF PRESENT & OR FORMER EMPLOYERS

NAME OF PRESENT EMPLOYER

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____

JOB TITLE _____ MAY WE CONTACT YOUR SUPERVISOR? YES ___ NO ___

ARE YOU AVAILABLE NIGHTS & WEEKENDS? YES ___ NO ___

EMERGENCY CONTACT INFO

NAME: _____ PHONE NUMBER: _____

SPECIAL QUESTIONS

“THESE QUESTIONS INDICATE THAT THIS INFORMATION IS REQUIRED FOR A BONIFIED OCCUPATIONAL QUALIFICATION, AS DICTATED BY NATIONAL SECURITY LAW, OR NEEDED FOR OTHER LEGALLY PERMISSABLE REASONS.”

HAVE YOU BEEN CONVICTED OF A FELONY OR MISDEMEANOR WITHIN THE LAST FIVE YEARS?

YES ___ NO ___

HEIGHT: FEET _____ INCHES _____ WEIGHT _____ DATE OF BIRTH _____

ARE YOU A UNITED STATES CITIZEN? YES ___ NO ___

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? YES ___ NO ___

HAVE YOU EVER BEEN SERIOUSLY INJURED? YES ___ NO ___

AUTHORIZATION

___ I CERTIFY THAT: THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTANDING; IF EMPLOYED ANY FALSIFIED STATEMENTS ON THIS APPLICATION MAY BE GROUNDS FOR TERMINATION; I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN.

___ 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 AT ANY TIME WITHOUT ANY PRIOR NOTICE “

DATE _____ SIGNATURE _____