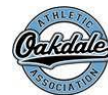


OAKDALE ATHLETIC ASSOCIATION - GAMING

Employment Application



APPLICANT INFORMATION										
Last Name				First			M.I.	Date		
Street Address						Apartment/Unit #				
City				State			ZIP			
Phone				E-mail Address						
Birthdate			Social Security No.				Date Available			
Position Applied for										
Pulltabs <input type="checkbox"/> Bingo <input type="checkbox"/> Paddlewheel <input type="checkbox"/>										
Location										
Sgt Peppers <input type="checkbox"/> JW's Bierstube <input type="checkbox"/>										
Availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
Afternoons?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Evenings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?						
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain						
EDUCATION										
High School					Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
College										
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other										
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES										
Full Name										
Phone				Relationship						
Full Name										
Phone				Relationship						

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
<p>I certify that my answers are true and complete to the best of my knowledge. I understand OAA may perform a background check.</p> <p>If this application leads to employment, I understand that false or misleading information provided in my application or interview may immediately terminate my employment.</p>	
Signature	Date