



PO Box 850
Cooperstown, New York 13326

Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date _____

Last name _____ First name _____ Middle Initial _____

Street Address _____

City _____ State _____ ZIP _____

Telephone _____ Email _____

Position applied for _____ When can you start? _____

Are you looking for full-time employment? Yes No Part time employment? Yes No

Have you ever been convicted of a felony? Yes No

If yes, please explain _____

Education

	School Name and Location	Year	Major	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
College	_____	_____	_____	_____
Other Training	_____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Position _____

Date Ended _____ Ending Position _____

Name of Supervisor _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Position _____

Date Ended _____ Ending Position _____

Name of Supervisor _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. Clark Sports Center is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or Clark Sports Center can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature _____ Date _____