

# SEDGWICK COUNTY ZOO

## Application for Employment

TODAY'S DATE	POSITION DESIRED
DATE AVAILABLE	REFERRED BY

PERSONAL DATA			
NAME	LAST	FIRST	MIDDLE
PRESENT ADDRESS		(STREET,CITY,STATE,ZIP CODE)	PHONE
PERMANENT ADDRESS		(IF DIFFERENT FROM ABOVE)	ADDITIONAL PHONE
		ARE YOU 16 OR OLDER?	ARE YOU 18 OR OLDER?
		YES      NO	YES      NO
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY THE SEDGWICK COUNTY ZOO?			YES      NO
NAME OF DEPARTMENT AND SUPERVISOR			

PLACEMENT INFORMATION								
HOURS		SUN	MON	TUE	WED	THUR	FRI	SAT
AVAILABLE	AM							
TO WORK	PM							
QUALIFICATIONS								
MOST RECENT SCHOOL ATTENDED					HIGHEST GRADE COMPLETED			
LIST ANY SPECIAL SKILLS WHICH MAY QUALIFY YOU FOR THE POSITION (EX: CUSTOMER SERVICE, OFFICE SKILLS, LANGUAGE SKILLS, ETC.)								
HAVE YOU EVER BEEN CONVICTED OF A FELONY?						YES      NO		
<small>(ANSWERING YES WILL NOT AUTOMATICALLY DISQUALIFY THE APPLICANT FROM EMPLOYMENT)</small>								
IF YES PLEASE EXPLAIN:								

EMPLOYMENT RECORD		
EMPLOYER NAME	TYPE OF BUSINESS	JOB TITLE
ADDRESS	PHONE	JOB DUTIES
SUPERVISOR'S NAME AND JOB TITLE		
DATES WORKED _____ TO _____	WAGE	
REASON FOR LEAVING		
EMPLOYER NAME	TYPE OF BUSINESS	JOB TITLE
ADDRESS	PHONE	JOB DUTIES
SUPERVISOR'S NAME AND JOB TITLE		
DATES WORKED _____ TO _____	WAGE	
REASON FOR LEAVING		
MAY WE CONTACT YOUR CURRENT EMPLOYER?		YES      NO
IF ADDITIONAL EMPLOYMENT RECORD, PLEASE ATTACH ON A SEPARATE SHEET		

CONTACT INFORMATION	
<b>PERSONAL REFERENCES</b>	
LIST TWO PERSONS, NOT RELATIVES OR FORMER EMPLOYERS, WHO HAVE KNOWN YOU FOR AT LEAST TWO YEARS	
NAME	NAME
PHONE	PHONE
<b>EMERGENCY CONTACT</b>	
PERSON(S) TO BE NOTIFIED IN CASE OF ACCIDENT OR EMERGENCY	
NAME	NAME
PHONE	PHONE
RELATIONSHIP	RELATIONSHIP

I UNDERSTAND THAT I AM APPLYING FOR "AT WILL" EMPLOYMENT AND THAT, IF I AM HIRED, I OR SEDGWICK COUNTY ZOOLOGICAL SOCIETY HAVE THE RIGHT TO END MY EMPLOYMENT RELATIONSHIP AT ANY TIME, WITHOUT CAUSE OR REASON.

I AUTHORIZE SEDGWICK COUNTY ZOO TO CONTACT THE REFERENCES LISTED ABOVE AND ANY OTHER REFERENCES I PROVIDE.

I UNDERSTAND THAT I AM SUBJECT TO A CRIMINAL BACKGROUND CHECK PRIOR TO OR DURING EMPLOYMENT AT THE SEDGWICK COUNTY ZOO.

THE FOREGOING STATEMENTS AND ATTACHED MATERIALS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT EMPLOYEES WHO PROVIDE FALSE INFORMATION WILL BE DISCHARGED.

SEDGWICK COUNTY ZOOLOGICAL SOCIETY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, MARITAL STATUS, NATIONAL ORIGIN, SEXUAL ORIENTATION, SEX, AGE, DISABILITY OR VETERAN STATUS.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_