

Personal References

List three persons, not related to you, whom you have known for at least one year.
(Examples: Teachers, coaches, etc.)

Name	Address and Phone Number	How do you know this person?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

If the company hires you, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot complete these requirements.

Authorization

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on the application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands, or liabilities arising out of or related to such investigation or disclosure.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired I agree to abide by all Company work rules, policies, and procedures. The Company retains the right to revise its policies and procedures, in whole or in part, at any time.

Date _____ Signature _____

Interviewed by _____

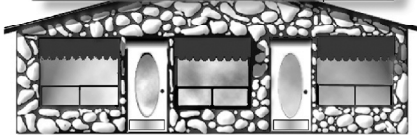
REMARKS Do not write below this line

Neatness _____ Character _____

Personality _____ Ability _____

Hired _____

For Department	Position	Will Report	Salary / Wages
Approved _____	_____	_____	_____
Employment Manager	Department Head		General Manager



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name (last, first, middle) Date
Social Security # Email address
Address Mailing address
City State Zip Code
Home phone () Cell Phone () Year of graduation -
What days and hours are you able to work? Days - Hours -
Date available to start - Are you 15 years of age or over? Yes No
Emergency Contact Contact phone # ()

EMPLOYMENT HISTORY (list recent first)

1. Employer Address
Phone # Supervisor
Date employed from to Describe the work you did -

2. Employer Address
Phone # Supervisor
Date employed from to Describe the work you did -

List 3 reasons why you want to work at the Rock House
1.
2.
3.