BENWOOD CITY PARK EMPLOYMENT APPLICATION

| FULL LEGAL NAME: | | | |
|---|---------------------------------------|-------------------------------|-----------------|
| ADDRESS: | | | |
| DME PHONE: CELL PHONE: | | | |
| If you are under the age of 18 do you | have a work permit: | YES; | NO |
| For what position are you applying: _ | | | Lobby; |
| Groundskeeper; QUALIFICATIONS: | | r;Manager. | |
| Do you have any impairments which which you are applying:Yes; PHYSICIAN'S NAME: NAME AND PHONE NUMBER OF PERS | No. If yes, please ex | plain AL: | |
| EMPLOYMENT HISTORY: Dates Employed Name | and Address of Business | w | ork Description |
| Have you ever been convicted of a cri | | | es;No |
| If yes, please explain Have you ever filed a workers compet If yes, please explain | nsation claim and received r | | Yes;No |
| REFERENCES: NAME | ADDRESS | Pŀ | IONE NUMBER |
| | | | |
| PLEASE READ CAREFULLY BEFORE SIGNING I hereby certify that all statements made on this em Benwood City Park Board to investigate these state falsification of these statements could result in dism basis of race, age or religious preference. | ments. If employed, I understand that | omission, deliberate misrepre | esentation, or |
| SIGNATURE: | DAT | E: | |