



Managed by Centennial Management Group, Inc.

EMPLOYMENT APPLICATION

The Maverik Center is an equal opportunity employer and does not discriminate because of sex, age, race, color, religious creed, marital or veterans status, citizenship, national origin, ancestry, disability, obligation to serve in the armed forces of the United States or any other characteristic protected by applicable federal, state or local laws.

INSTRUCTIONS: Please TYPE your responses. Provide all information requested on the application itself. Do not make references to resume or attachments. Resumes and attachments may be included but cannot be substituted for a completed application form.

NAME _____ DATE _____

ADDRESS (City, State, Zip) _____

TELEPHONE NUMBER: Home) _____ Cell) _____

E-MAIL _____

What type of employment are you seeking? (**RANK IN ORDER OF PREFERENCE**)

- | | |
|------------------------|---|
| ___ Concessions | Custodial/Post-event Clean-up |
| ___ Kitchen/Catering | ___ Operations/Changeover |
| ___ Secretary/Clerical | ___ Event Staff (Ushers, Ticket Takers, Security) |
| ___ Ticket Office | ___ Other _____ |

Are you at least 18 years of age or older? YES NO

(If you are under 18 years of age State and Federal regulations may apply)

Are you at least 21 years of age or older? YES NO

(If you are under 21 years of age State and Federal regulations may apply)

Have you ever been convicted of a crime? YES NO

(Criminal conviction will not necessarily bar you from employment)

Are you legal to work in the U.S.?
 YES NO

Are you available weekends?
 YES NO

Are you available holidays?
 YES NO

Have you ever worked in a similar environment?
 YES NO

If yes, please state your experience _____

Do you have any special training or certificates? YES NO

If yes, please list _____

Which shifts are you available to work? DAYS EVENINGS NIGHTS

When are you available to begin working? _____

Did you graduate from high school? YES NO

What is the last grade completed?

College or Trade School	From YEARS To	Major Subject	Degree	Awarded

PERSONAL REFERENCES

Reference	Address	Phone	Relation

EMPLOYMENT HISTORY

Company Name:		Title of Position:	
Address:		Phone:	
Duties:			
Supervisor:	Title:	Dates worked (FROM)	(TO)
Ending Salary:	Hours per Week:	Reason for Leaving:	

Company Name:		Title of Position:	
Address:		Phone:	
Duties:			
Supervisor:	Title:	Dates worked (FROM)	(TO)
Ending Salary:	Hours per Week:	Reason for Leaving:	

May we contact your current employer? YES NO

APPLICATION CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in this employment application are true and complete to the best of my knowledge and understanding. I further certify that I understand and agree that, if I am employed by the Maverik Center, or any affiliated company, my employment will be "AT WILL", that is either I or the Maverik Center may end the employment relationship at any time for any reason or for no reason. I further certify that I understand and agree that if I am employed I am not entitled to any warnings, oral or written, or any review by higher management, prior to the termination of my employment by the Maverik Center. I further certify I understand that no representative of the Maverik Center has the authority to enter into any agreement with me for employment for any specific period of time or to make any agreement with me contrary to the foregoing. I further certify that the first ninety (90) days of employment are probationary and will be subject to review after this period. I hereby authorize the company to verify any of the information set forth on the foregoing application, to make any investigation of my personal history, criminal history, and/or to investigate or obtain any and all credit information, and I release the Maverik Center and its affiliated companies from any and all liability for doing so. I understand that if hired by the Maverik Center, I will be required to submit satisfactory proof of citizenship or immigration documentation. I certify that I have no objections to the following conditions concerning my employment:

Available for overtime schedule, submitting to drug testing as requested by management following the requirements allowed by law, and returning all company-issued items at the time of the termination of my employment. By typing in your name you will consider this a signed agreement.

SIGNATURE

DATE