



**An Equal Opportunity
Employer**

LILAC LANES & CASINO APPLICATION FOR EMPLOYMENT

Personal Information

Date _____

Name (Last, First, Middle)		Social Security Number	
Address	City	State	Zip Code
Home Phone	Cell Phone	Referred By	

Employment Desired

Position Desired		Available Start Date	Salary Desired
Are You Currently Employed	May We Contact Present Employer?	Contact/Phone Number	

Education

Name and Location of School	Years Attended	Did You Graduate	Subjects Studied
Grammar School			
High School			
College			
Trade, Business, or Correspondence School			

General Information

Subjects of Special Study/Research Work or Special Training/Skills		
U.S. Military Service	Rank	Discharge Type

Former Employment

Date: Month/Year	Name and Address of Employer	Salary	Position	Reason For Leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

References

Give the names of three persons not related to you, whom you have known at least one year

Name	Phone Number	Business	Years Known

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Lilac Lanes & Casino from all liability for any damages that may result from utilization of such information. I also understand and agree that no representative of Lilac Lanes & Casino has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized Lilac Lanes & Casino representative. This waiver does not permit the release or use of disability related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Signature _____

Date _____

Interviewed By _____

Date _____

*******Do Not Write Below this Line*******

Remarks

Neatness		Character		
Personality		Ability		
Hired	For Department	Position	Will Report	Salary/Wages