## **Application for Employment**

## Recreation Factory Partners, LLC dba

## **ORANGE COUNTY SPORTSPLEX**

101 Meadowlands Drive Hillsborough, NC 27278 (919) 644-0339

## PLEASE PRINT

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accomodation to the application and/or interview process should notify the Assistant General Manager.

Front	tics/Lifeguard Bir Desk Ic	rthday Parties e Rink/Skate Guard	Cleaning KidsPlex	Fitness Field House Swim Instructor		
Name	EIDCT	MI		Date of appl	ication	
Address	FIRST	M.I.				
Telephone # (	)	Mobile / Other #	<u> </u>			_
E-mail Address (required	d)					
If no, please explain  Have you ever been employe If yes, give dates and position Are you legally eligible for en Date available for work  Type of employment desired Are you able to meet the atte Have you ever pled "guilty" o If yes, please provide date(s) ANSWERING "YES" TO THESE QUESTIO OF THE VIOLATION, REHABILIATION, AN Driver's license number  Skills and Qualificat Summarize any training, s	Front Desk Management Snack Plex Swim Instructor  The Date of application / / Date of application / Date of application / Date of application / Date of application / / Date of application / Date of applicatio					
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OTHER						
References (Profess	sional)		<u> </u>			
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Applicant Sta	atement							
I certify that all informa	ation I have provided	d in order to apply for and	d secure	work with the emp	oloyer is true, comp	olete and correct.	-	
		d by me that is found to b						i) cancel
and professional), em by me in this application	ployers, public agen on, resumé, or job in eeking, gathering and	the employer, its repres- cies, licensing authoritie- iterview. I hereby waive d using such information	s and ed any and	ucational institituti all rights and clair	ons and to otherwi ns I may have rega	se verify the accu arding the emplo	uracy of all informa yer, its agents, emp	tion provided oloyees or
		nlawfully discriminate in byment on a basis prohib				ion is used for the	e purpose of limitin	g or excusing
		current for only 30 days.			time, if I have not h	eard from the en	nployer and still wis	sh to be
terminate my employn agreement or contract	nent at any time, witl t for employment for ny assurances to the	o resign at any time, with h or without cause and w any specified period or o contrary and that no imp er's president.	<i>i</i> ithout pr definite d	rior notice, except luration. I underst	as may be required and that no superv	d by law. This ap isor or represent	oplication does not ative of the employ	constitute an er is
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I certify that I h	ave read, fully	y understand and	l acce	pt all terms	of the forego	ing Applicar	nt Statement.	
Signature of Applicant						Date_	1	1
				OFFICE		TSP initials		

USE ONLY

Date -