

Facility Name: VENUWORKS OF BLOOMINGTON																
OB PREFERENCE																
Please check department/position for which you are applying. Event Staff* ☐ Office Support /Clerical ☐ Office* ☐										f - Food & erage*	_ ' _					
Housekeeping Security* Bartending Staff Staff ☐ (Must be at least 21) ☐ *Some of these positions red very well.							ns requ	uire th	ne ability to	see ar	nd hear					
PERSONAL INFORMATION																
Your Name:	ur Current															
E-mail Address:	Current Phone:															
<u>Current</u> Address:																
<u>Current</u> City	State: Zip Code:															
Have you ever been employed by this facility before? Yes If yes, list when?																
Can you le United Sta	gally tes?	work in the		Yes No				e the a		oppropriate documentation to legally work Yes No						
If this position requires driving, do you hold a valid license? Yes ☐ If yes, date of expiration?																
WORK AV	'AIL	ABILITY														
		le to work fo s of the year		re	Yes [No [k by markin reek listed b			
	Mornings					5	Eveni	ings	A	All Day			Othe (Please de)	
Monday	y]					,	•		
Tuesda	У			[]								
Wednesd	sday 🔲 🗆]										
Thursda	y]								
Friday]								
Saturda	У]								
Sunday	/			Г	7			1								



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	School Names & Locations								Highe	st Grade	Comple	ted			
High School:							Major		9 🗆	10 🗆	11 🗌	12 🗌			
Address/ City/State															
College/ University	:								1	2 🗌	3 🗌	4 🗆			
Address/ City/State	:														
Tech. College:									1	2 🗌	3 🗌	4 🗌			
Address/ City/State						I		1							
College Other:															
Address/ City/State								1							
SPECIAL	TRAIN	ING/SK	ILLS												
	klift: 🗌					Trad	ctor/Mower	:: 🗆	Zamboni: ☐						
Other: (List)															
COMPUTE	R SKIL	LS													
List compusoftware s	uter/		Other												
(wpm):			(List):												



EMPLOYMEN	IT HISTOR'	Υ									
Employer's Name:					Supervisor's Name:						
Employer's Address:											
Employer's City:								State:		Zip Code:	
Employer's Phone:				Starting Wage:				Final Wage:			
Dates employed:	From:		To:		Reaso leavir	on for ng:					
Position /Duties:											
Employer's Name:	Supervisor's Name:										
Employer's Address:											
Employer's City:								State:		Zip Code:	
Employer's Phone:				Starting Wage:				Final Wage:			
Dates employed:	From:		To:		Reaso leavir	on for ng:					
Position /Duties:											
REFERENCES	<u> </u>										
Name:					Oc	cupation:					
Relationship to Applicant								Pho Nui	one mber:		
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PLEASE READ	CAREFULLI											
made are true offer is continged. If employed	ereby certify that the answers given by me to the foregoing questions and statements true and correct, without reservations of any kind whatsoever. I understand that any job attingent upon my providing the documentation required by the Immigration Reform Control ployment is obtained under this application, I will willingly comply with all orders, rules and sof VenuWorks, Inc. and its subsidiaries VenuWorks of Bloomington, LLC. (Initials)											
I understand that nothing contained in this employment application or in the granting of an interview is intended to create a contract between me and VenuWorks of Bloomington, LLC for either employment or the provision of benefits and that an offer of employment or completion of VenuWorks of Bloomington, LLC probationary period shall not be construed as a guarantee of continued employment. If an employment relationship is established subsequent to the date of this application, I will have the right to terminate my employment at any time (with or without cause) and VenuWorks of Bloomington, LLC will have a similar right. If an employment relationship is established, I understand that my work schedule will vary depending on event staffing requirements. VenuWorks of Bloomington, LLC cannot guarantee a specific number of annual employment hours. (Initials)												
I also authorize my former employers, schools and personal references to give any information they may have regarding me, whether or not it is contained in a written record. I hereby release them and their companies from all liability for issuing same. It is understood that all facts are open to investigation by VenuWorks of Bloomington, LLC and that, upon investigation, if anything contained in this application is found to be false or misleading, I will be subject to immediate discharge from employment and agree to hold VenuWorks of Bloomington, LLC and person named herein blameless in that event. I understand that no promise, representation, agreement, practice or policy contrary to the foregoing is binding on VenuWorks of Bloomington, LLC unless made in writing and signed by an officer of VenuWorks of Bloomington, LLC. (Initials)												
I AUTHORIZE VenuWorks of Bloomington to perform a criminal background check on me, which will include the sex offender registry. (Initials)												
Applicants will be subject to a criminal background check(s) and may be subject to pre- employment drug testing. Any offer of employment is conditional and based upon the results of the criminal background and/or drug screenings.												
SIGNATURE												
Applicant's Signature:		Date:										
/e appreciate your interest and the time you have taken to complete this application. Thank you.												
Facility Representative:		Department	:									