



# APPLICATION FOR EMPLOYMENT

## PERSONAL INFORMATION

Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ First Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone #  Home  Cell \_\_\_\_\_ Alternate # \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Have you worked for Titans before?  No  Yes If yes, when? \_\_\_\_\_

## POSITION

Position applying for \_\_\_\_\_  Seasonal /Temporary  
 Are you interested in:  Full Time (min. of 28 hrs per week)  Part Time (less than 28 hrs per week) How did you learn about this opportunity? \_\_\_\_\_

## AVAILABILITY

Date available to start (dd/mm/yy) \_\_\_\_\_. Indicate days you are available (specify a.m. or p.m.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

## EDUCATION

Tell us the highest or equivalent level completed

Institution Type	Completion	Type of Certification/Diploma/Degree Received
High School Year Completed	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
Post-Secondary	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	

## EMPLOYMENT HISTORY

Current/Last Position Title \_\_\_\_\_ Company Name \_\_\_\_\_  
**1** Company Address \_\_\_\_\_  
 Responsibilities \_\_\_\_\_  
 Date of Employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_  
 Supervisors Name \_\_\_\_\_ Position Title \_\_\_\_\_  
 May we contact them? Yes No Supervisor's # \_\_\_\_\_  
 Current/Last Position Title \_\_\_\_\_ Company Name \_\_\_\_\_  
**2** Company Address \_\_\_\_\_  
 Responsibilities \_\_\_\_\_  
 Date of Employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_  
 Supervisors Name \_\_\_\_\_ Position Title \_\_\_\_\_  
 May we contact them? Yes No Supervisor's # \_\_\_\_\_

I certify that the information on this application is correct and I understand that any misrepresentation or omission of any information will result in my disqualification from consideration for employment or if employed my dismissal for just cause. Titans Sports Academy may verify the information set forth on this application and obtain additional background information relating to my background. On the first day of employment I agree to Titans proof of my age, social security number, Ca. identification, and birthday certificate, and other form as required by law.

Candidate's name (please print) \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_