



Charlie's Safari Employment Application

Charlie's Safari is an Equal Opportunity Employer

Please email or fax your application to:

info@charliessafari.com

Fax (360) 292-1602

Name (Last, First, and Middle Initial)				Date
Other name under which you have worked				Day Phone No.
Job Title for which you are applying				Msg Phone (if different than Day Phone)
Mailing Address (Include apartment number, if any)				E-Mail Address
City	County	State	ZIP	

How did you learn of this employment opportunity?

- Visit to Charlie's, an Employee, or Our Website
 Other Employment Website or Job Board (if so, which one?)
 College or Other School (if so, which one?)
 Job Fair (if so, where?):
 Newspaper if so, which one?

Interest and Availability

Why are you applying for work at Charlie's Safari?

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes No

If hired, can you prove you are a U.S. citizen or that you have a legal right to live and work in this country? Yes No

Education and Training

Have you graduated from high school or passed the General Education Development (GED) test? Yes No

List any relevant college, business school, or other education. Last five years is sufficient.

Name and Location of School or Training	Month/Year Attended		Credits Earned			Major	Type of Degree	Year Awarded
	From	To	Quarter	Semester	Other (Specify)			
1	/							
2	/							
3	/							
4	/							
5	/							

Background

Have you been convicted of a misdemeanor or felony in the past ten (10) years? Yes No
 (Answering Yes will not automatically exclude you from employment.)

Are you able to perform the Essential Functions of the job with or without reasonable accommodation? Yes No
 If no, describe in the space below this box the functions that cannot be performed.

(Note: We comply with the Americans with Disabilities Act and consider reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions.)

REFERENCES Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Employment History- We intend to contact your previous employer(s) unless you indicate that you prefer we not do so.

Present or Last Employer		Employer's Address		Employer's Phone No.	
				May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Title of Position Held		Reason for leaving		Dates of Employment	
				Average Hours Worked Per Week	
Salary	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Employees Supervised	Supervisor's Name		
Specific Duties:					
Reason for Leaving:					
Present or Last Employer		Employer's Address		Employer's Phone No.	
				May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Title of Position Held		Reason for leaving		Dates of Employment	
				Average Hours Worked Per Week	
Salary	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Employees Supervised	Supervisor's Name		
Specific Duties:					
Reason for Leaving:					
Present or Last Employer		Employer's Address		Employer's Phone No.	
				May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Title of Position Held		Reason for leaving		Dates of Employment	
				Average Hours Worked Per Week	
Salary	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Employees Supervised	Supervisor's Name		
Specific Duties:					
Reason for Leaving:					

Date and Signature Please read carefully before signing. I hereby certify that the information provided in this application is true and correct to the best of my knowledge and belief. By signing and submitting this application, I authorize the company to investigate all statements made in this application and to conduct such background investigation of me as it, in its sole discretion, shall deem appropriate.

I hereby acknowledge that I have read the foregoing statements, that I understand them, and that I will be bound by their terms.

Electronic applications do not require a signature. When submitted electronically, you are confirming that all information is true and complete.

Signature	Date (Month/Day/Year) / /
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