Sun Mountain Fun Center

APPLICATION FOR EMPLOYMENT

NOTIFICATION OF NEED FOR REASONABLE ACCOMODATION: If you need an accommodation to complete this Employment Application ("Application"), please notify Sun Mountain Lanes, Inc., an Oregon corporation, dba Sun Mountain Fun Center (hereinafter "SMFC").

Today's Date: Date available to start work:

Please print in ink and complete all information:

Name: First: Middle Initial:

Address Number & Street:

City: State: Zip:

Home Phone Number: Cell Phone:

Social Security #: If you are under 18, please provide your birth date:

Work Permit Number (if applicable):

Can you provide a valid OLCC permit card? ☐ Yes ☐ No   Can you provide food handler's card? ☐ Yes ☐ No

What days and hours are you available for work?   ☐ Full Time ☐ Part Time
(PLEASE NOTE: We are temporarily open Wednesday-Sunday 12pm-8pm; working hours vary 11:30am-9:00pm)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
to	to	to	to	to	to	to

Should your availability change during the course of your employment, it may impact your employment status based upon SMFC's business needs. While SMFC may be able to accommodate your availability limitations upon hire, SMFC does not guarantee that it will be able to support these limitations in the future. Should SMFC's business needs change; SMFC may require an adjustment in your availability.

Have you been employed by Sun Mountain Fun Center previously?   ☐ Yes ☐ No

If yes, when?

Have you even been convicted of a crime?   ☐ Yes ☐ No

If yes, please explain. (A conviction will not automatically bar employment)

Are you related to anyone in at Sun Mountain Fun Center?   ☐ Yes ☐ No

If yes, please note name of employee:

SMFC is an equal opportunity employer and does not unlawfully discriminate on the basis of race, sex, sexual orientation, age, color, religion, national origin, martial statue, veteran status, disability status, or any other basis prohibited by federal, state or local law.

SMFC is committed to providing a safe and productive work environment. All employees must be able to perform the essential functions of their position, with or without accommodation

EMPLOYMENT HISTORY

Please complete and attach a resume. Please account for all time since leaving high school, or the last seven years. Begin with the most recent. Include military service and all periods of unemployment exceeding thirty days. Please use back of page if more room is required.

May SMFC contact your present or previous employer?　　　☐ Yes　☐ No

Current Employer:

Position Held:　　　　　　　　　　　　　　　　　Telephone Number:

Address:

Immediate Supervisor and Title:

Dates employed from:　　　　　　　　to　　　　　　　　Wages:

Job Summary:

Reason for leaving:

Previous Employer:

Position Held:　　　　　　　　　　　　　　　　　Telephone Number:

Address:

Immediate Supervisor and Title:

Dates employed from:　　　　　　　　to　　　　　　　　Wages:

Job Summary:

Reason for leaving:

IMPORTANT: PLEASE READ AND SIGN

I declare that all statements made in connection with the Application (whether contained herein or made during the course of any related employment process) are true and complete, and hereby agree and acknowledge that any verbal or written statement that is false, fraudulent, or misleading, or any omission, concealment, or failure to answer any question fully completely, and accurately, whether made by me or by others at my request, will result in rejection of this Application, denial of employment, or dismissal from employment if discovered after employment.

I authorize the investigation of all matters which SMFC deems relevant to my qualifications for employment, including but not limited to, an investigation into my criminal history. By signing below, I hereby release SMFC and any and all providers of information from any and all liability arising out of or in any way connected with "SMFC's background investigation. If employed, I release SMFC from any liability for future references it may provide regarding my work history with SMFC.

I agree that upon termination of my employment, I will return all SMFC property and records in my possession.

If employed, I agree to read and comply with all SMFC rules, regulations and policies.

I understand that all employees of SMFC are at will, and that as such, may be terminated with or without cause, without notice, and for any reason whatsoever. Nothing contained in this Application, or provided in connection herewith, will be construed to create an employment contract, or guarantee that employment or any benefit will be provided or continued for any period of time. Any salary figures provided in annual or monthly terms are stated for the sake of convenience, or to facilitate comparisons, and are not intended and do not create an employment contract for any specific period of time.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature:　　　　　　　　　　　　　　　　　　　Date: