

Application for Employment

Date _____

Last name First name(s)

Street address City Province Postal code

Telephone (include area code) Fax E-mail

Social Insurance Number Date of Birth Age

| | | | | | |
|------------------|-----------|---------------------|----------|----------|---------------|
| Hours available: | Wednesday | 4:00 to 9:00 pm | FT _____ | PT _____ | On Call _____ |
| | Friday | 4:30 to 9:30 pm | FT _____ | PT _____ | On Call _____ |
| | Saturday | 4:30 to 9:30 pm | FT _____ | PT _____ | On Call _____ |
| | Sunday | 7:30 AM to 12:30 PM | FT _____ | PT _____ | On Call _____ |
| | Sunday | 1:30 pm to 7:30 pm | FT _____ | PT _____ | On Call _____ |

CERTIFICATES

| | | | |
|------------------|-----------|----------|------------|
| Food Safe | YES _____ | NO _____ | YEAR _____ |
| Serving It Right | YES _____ | NO _____ | YEAR _____ |
| First Aid | YES _____ | NO _____ | YEAR _____ |

Work experience

Have you worked at Western Speedway Previously? Year(s) _____

What position(s) did you hold _____

position or positions you would be willing to work:

| | | | |
|---------------------------|----------------------|----------------------|-------------------------------|
| Main Ticket Cashier _____ | Back Gate _____ | Pizza Booth _____ | BBQ _____ |
| Concession Cashier _____ | Prep Cook _____ | Program Seller _____ | In- Field Concession _____ |
| Concession Runner _____ | Candy Booth _____ | Fry Cook _____ | Beer Garden _____ |
| Cook _____ | Souvenir Store _____ | VIP Booth _____ | Front Door Ticket Taker _____ |

Emergency Contact Name & Number _____

I certify that all information provided in this application is accurate and complete to the best of my knowledge, and I understand that intentionally providing false information could result in refusal of employment or discharge. I also authorize the employers, schools, organizations, or persons named above to provide information regarding my employment, education, character, and qualifications.

Signature

Date