



**Pierce Skate and Ski**  
 208 West 98th Street  
 Bloomington, MN 55420  
 952-884-1990 · FAX 952-884-6932  
 Toll Free 1-888-754-1996

**EMPLOYMENT APPLICATION**

All information in this document is confidential.

Please print.

Name/Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
 (Use legal name)

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Male / Female \_\_\_\_\_ Are you 18 years or older?  Yes  No If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?  Yes  No  
 (Circle One)

Department Desired  Clothing  Service  Skates  Skis Date Available to Start \_\_\_\_\_

Hours per week/month \_\_\_\_\_ Preferred Days  Mon  Tues  Wed  Thurs  Fri  Sat  Sun

Are you employed now?  Yes  No If yes, Can we contact your current employer?  Yes  No

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation?  Yes  No

If no, describe functions that cannot be performed:

*(Note: Company complies with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)*

Military Experience?  Yes  No Branch \_\_\_\_\_ Rank \_\_\_\_\_ Total Years of Service \_\_\_\_\_

**EMPLOYMENT HISTORY**

Name of current employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ Date Employment Began \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_

May we contact employer? Yes  No  Description of duties \_\_\_\_\_

Employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ Date Employment Began \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_

May we contact employer? Yes  No  Description of duties \_\_\_\_\_

Employer \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Date Employment Began \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_

May we contact employer? Yes  No  Description of duties \_\_\_\_\_

**REFERENCES** (Personal or professional; not a relative)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

**DO YOU SHARE OUR PASSION?**

Why do you think you would be a good fit with our team? (Explain briefly)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IN CASE OF EMERGENCY, PLEASE NOTIFY**

1) Name \_\_\_\_\_ Relationship \_\_\_\_\_ Day Phone (\_\_\_\_) \_\_\_\_\_

**CRIMINAL HISTORY**

Have you ever been convicted of a misdemeanor or felony, or are any misdemeanor or felony charges pending against you? Yes \_\_\_\_ No \_\_\_\_ If yes, please explain below. (Note: Answering yes will not automatically prohibit employment but will be considered with respect to time, circumstances, seriousness and relationship to position)

\_\_\_\_\_  
\_\_\_\_\_

My signature below certifies that all statements made on this application are true, complete and correct to the best of my knowledge and belief. I understand these statements are subject to verification. I understand that falsification on this application can disqualify me from consideration for employment, If I am employed, my employment may be terminated at any time. In consideration with my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than the President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Furthermore, my signature below provides my authorization to Pierce Skate and Ski to conduct reference checks to determine my suitability for placement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Pierce Skate and Ski acknowledges that equal opportunity for all persons is a fundamental human value. Each applicant will be considered on the basis of individual ability and merit, without regard to race, color, age, religion, national origin, disability, sexual orientation, sex, or marital status.