

APPLICATION FOR GOOFBALLS PARTY TEAM

(please print)

Prospective team members will receive consideration without discrimination because of race, color, sex, age, national origin or disability.

Last Name _____ First Name _____ Middle _____

Street Address _____

City, State, Zip _____

Are you under 18 years of age? _____ If "yes", date of birth __/__/__

Type of transportation to work? ___ car ___ bus ___ other

How far do you live from here? _____

Have you ever applied for employment or been employed by us?

___ yes ___ no ___ applied If yes where? _____ When? _____

Do you have experience working with children? ___ yes ___ No

Date _____

Home phone _____

Business phone _____

Social Security _____

Email Address _____

Pay expected _____

Can you work weekends? ___ yes ___ No

Will you work overtime if asked ___ yes ___ No

When will you be available to start?

Describe yourself in one word _____ Your greatest accomplishment?

What do you want to be when you grow up?

How are you most like a kid?

List your involvement in plays, dance, sports (individual or team)

Hours Available

From							
To							
Mon	Tues	Weds	Thurs	Fri	Sat	Sun	

Company	City	Phone	Supervisor
Dates Position Description From _____ To _____			
Reason For Leaving			
Company	City	Phone	Supervisor
Dates Position Description From _____ To _____			
Reason For Leaving			