

Employment Application			Application Date		
Last Name		First Name	Middle		
Street Address		City, State, Zip	() Home Pho	one ()Other Phone	
Email Address					
Have you previously applied for a	position or worked for our C	ompany? yes no	(If yes, please list dates a	nd location of previous employment)	
f given a conditional offer can yo Furnish proof that you are at lea if under 18, eligible for employm	additional verifications may be required, including pre-employments that you are at least 18 years of age or, testing, criminal background checks, and motor vehicle record rep				
Furnish proof that you are eligib employment in the United States	le for				
are there any special circumstance		m the job for which you are	applying?yes	_ no (If yes, please explain):	
osition Desired	# hrs/wk a	# hrs/wk and days of the week you are available		Start Date	
econdary Position	# hrs/wk a	nd days of the week you are	available	Start Date	
EDUCATION Circle highest grade or # of years completed	Grade School 4 5 6 7 8	High School 9 10 11 12	Jr College 1 2 3	College 1 2 3 4 5 6 7	
High School		City, State, Zip	Graduate?	Diploma	
College		City, State, Zip	Graduate?	Diploma or Degree	
Other School		City, State, Zip	Graduate?	Diploma or Degree	
Summarize any experience, know	ledge, skills, abilities, or specia	nlized training you would lik	se us to know about:		



From:	To:	Company Name:		
Reason For Lea	ving:			
Position Held: _			City, State, Zip:	
Phone Number:		Supervisor Name:		May we contact this employer?YN
From:	To:	Company Name:		
Reason For Lea	ving:			
Position Held:_			City, State, Zip:	
Phone Number:		Supervisor Name:		May we contact this employer?YN
From:	To:	Company Name:		
Reason For Lea	ving:			
Position Held:_			City, State, Zip:	
Phone Number:		Supervisor Name:		May we contact this employer?YN
Please account f	for any periods of une	employment in the space provided below:	:	
From:		Explanation:		
То:				
From:		Explanation:		
То:				
				Management to verify all of the statements you background (where this is a job requirement).
	PI	LEASE READ AND INITIAL EA	ACH SECTION LIST	TED BELOW
information re	quested in this doc		nay disqualify me fron	knowledge. I understand that falsification of n further consideration for employment, or, if (Applicant's Initials)
employment ar		ormation they may have, personal or o		ny and all information concerning my previous l parties from liability for any damage that may (Applicant's Initials)
no definite per without prior r	iod and may, regard notice. I also unders	lless of the date of payment of my wa	ages and salary, be termins and conditions of my	oyment, and that, if hired, my employment is for inated at any time for any or no reason, with or employment may be changed, with or without ement to the contrary. (Applicant's Initials)
company authorized will be kept st	orized, licensed med	lical facility which includes screening I hereby release Kemper Sports Mar	for the presence of con	e in a pre-employment drug testing program at a trolled substances. I understand that the results es or agents thereof from any and all claims or (Applicant's Initials)



Applicant Signature:	 Date:	
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KemperSports is an Equal Opportunity Employer dedicated to a policy of non-discrimination in employment on any basis including age, sex, race, color, creed, ancestry, religion, disability, national origin, citizenship status, veteran status, marital status, military status, sexual orientation, pregnancy, medical condition or any non-job or non-business related factors or any other basis upon which discrimination is prohibited by the municipal, state, or other federal law. No question on this application is intended to secure information to be used for such discrimination.