

APPLICATION FOR EMPLOYMENT



6 4 Fun LLC
d/b/a The Amazing Pizza Machine

Date of Application: _____

Location: _____

*This application will be kept on active file for 30 days.
 If you are not hired during that time period, but wish to
 continue to be considered for available positions, you must complete a new application.*

WE TEST FOR DRUGS

THE COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER AND BELIEVES STRONGLY IN THE PRINCIPLES OF NON-DISCRIMINATION. NO ACTION WILL BE TAKEN OR WITHHELD ON THE BASIS OF RACE, COLOR, RELIGION, SEX, DISABILITY, NATIONAL ORIGIN, AGE (40 or older), GENETIC INFORMATION, VETERAN'S STATUS, MARITAL STATUS, OR ANY OTHER LEGALLY RECOGNIZED PROTECTED BASIS UNDER FEDERAL, STATE, OR LOCAL LAWS, REGULATIONS, OR ORDINANCES.

APPLICANTS WITH DISABILITIES MAY BE ENTITLED TO REASONABLE ACCOMMODATION UNDER THE TERMS OF THE AMERICANS WITH DISABILITIES ACT, NEBRASKA FAIR EMPLOYMENT PRACTICE ACT, AND LOCAL LAWS. A REASONABLE ACCOMMODATION IS A CHANGE IN THE WAY THINGS ARE NORMALLY DONE WHICH ENSURE AN EQUAL EMPLOYMENT OPPORTUNITY WITHOUT IMPOSING UNDUE HARDSHIP ON THE COMPANY. PLEASE INFORM THE COMPANY'S REPRESENTATIVE IF YOU NEED ASSISTANCE COMPLETING ANY FORMS OR TO OTHERWISE PARTICIPATE IN THE APPLICATION PROCESS.

PLEASE READ CAREFULLY AND PRINT CLEARLY

Name: _____
Last First Middle Initial

Current Address: _____
Number Street

City State Zip Code

Telephone Number: _____

Email Address: _____

JOB INTEREST

Type of Position Desired (Check All Applicable) - NOTE: You must be 18 or 19 or older to be considered for certain positions

Management / Office

Store Operations

Hours Preference:

- | | | | | |
|--------------------------------------------------------|--------------------------------------------|---------------------------------------------|------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Clerical/Para-Professional | <input type="checkbox"/> Arcade Host | <input type="checkbox"/> Cashier | <input type="checkbox"/> Dough Room (18+) | <input type="checkbox"/> Full Time Only |
| <input type="checkbox"/> Professional/Managerial (18+) | <input type="checkbox"/> Arcade Tech (18+) | <input type="checkbox"/> Costume Character | <input type="checkbox"/> Pizza Table / Kitchen | <input type="checkbox"/> Part Time Only |
| <input type="checkbox"/> Bookkeeping/Other | <input type="checkbox"/> Group Sales | <input type="checkbox"/> Dining Room Busser | <input type="checkbox"/> Prep (18+) | <input type="checkbox"/> Part Time with |
| <input type="checkbox"/> Manager / Supervisor (18+) | <input type="checkbox"/> Bartender (19+) | <input type="checkbox"/> Dish Room | <input type="checkbox"/> Ride Operator (18+) | desire for full time |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Buffet Monitor | <input type="checkbox"/> Other _____ | | |

What job position are you most interested in? _____ How many hours per week would you prefer? _____

How many days per week would you prefer to be scheduled? _____

Most of our available job positions require working nights and weekends. Are you available nights and weekends? Yes No

AVAILABILITY TO WORK	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Can start work at what time?							
Can work until what time?							

CURRENT & FORMER EMPLOYERS (Include Part-Time and Vacation Jobs)

*** List in order, beginning with the most recent. ***

Applicant's Name (Printed)

Date

1	Employer	Starting Job Title:
	Address	Final Job Title:
	City/State/Zip	Why did you leave?
	Telephone Number	
	Immediate Supervisor	May we contact supervisor for a reference?: YES NO ASK ME
	Dates Employed From: To:	
	Wages Starting: Ending:	Bonus: Starting Ending:
	Summarize your primary responsibilities and duties	
	What were the things you liked best about the position?	

2	Employer	Starting Job Title:
	Address	Final Job Title:
	City/State/Zip	Why did you leave?
	Telephone Number	
	Immediate Supervisor	May we contact supervisor for a reference?: YES NO ASK ME
	Dates Employed From: To:	
	Wages Starting: Ending:	Bonus: Starting Ending:
	Summarize your primary responsibilities and duties	
	What were the things you liked best about the position?	

3	Employer	Starting Job Title:
	Address	Final Job Title:
	City/State/Zip	Why did you leave?
	Telephone Number	
	Immediate Supervisor	May we contact supervisor for a reference?: YES NO ASK ME
	Dates Employed From: To:	
	Wages Starting: Ending:	Bonus: Starting Ending:
	Summarize your primary responsibilities and duties	
	What were the things you liked best about the position?	

REFERENCES

List below individuals who are well acquainted with your skills. DO NOT list relatives, former employees, or former supervisors.

	Name	Title	Relationship to You	Address	Telephone Number
1					
2					
3					

CONSENT TO PROVIDE EMPLOYMENT HISTORY TO PROSPECTIVE EMPLOYER

NEBRASKA REV. STATUTE 48-201 GOVERNS THE SPECIFIC AUTHORIZATIONS/PERMISSIONS/LIMITATIONS OF THIS CONSENT.
I HEREBY GIVE CONSENT TO ANY AND ALL EMPLOYERS OF MINE TO PROVIDE INFORMATION WITH REGARD TO MY EMPLOYMENT WITH MY PRIOR EMPLOYERS TO THE COMPANY. THIS CONSENT IS VALID FOR SIX MONTHS FROM THE DATE OF MY SIGNATURE BELOW. I CONSENT TO THE DISCLOSURE OF THE FOLLOWING INFORMATION ABOUT ME BY ANY AND ALL OF MY PRIOR EMPLOYERS:

- 1 DATE AND DURATION OF EMPLOYMENT;
- 2 PAY RATE AND WAGE HISTORY ON THE DATE OF RECEIPT OF THIS WRITTEN CONSENT;
- 3 JOB DESCRIPTIONS AND DUTIES;
- 4 THE MOST RECENT WRITTEN PERFORMANCE EVALUATION PREPARED PRIOR TO THE DATE OF THE REQUEST FOR INFORMATION AND PROVIDED TO ME DURING THE COURSE OF MY EMPLOYMENT;
- 5 ATTENDANCE INFORMATION;
- 6 RESULTS OF DRUG OR ALCOHOL TESTS ADMINISTERED WITHIN ONE YEAR PRIOR TO THE REQUEST FOR INFORMATION;
- 7 THREATS OF VIOLENCE, HARASSING ACTS, OR THREATENING BEHAVIOR RELATED TO THE WORKPLACE OR DIRECTED AT ANOTHER EMPLOYEE;
- 8 WHETHER I WAS VOLUNTARILY OR INVOLUNTARILY SEPARATED FROM EMPLOYMENT AND THE REASONS FOR SEPARATION; AND
- 9 WHETHER I AM ELIGIBLE FOR REHIRE.

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information contained in this application is true, to the best of my knowledge, and I understand that any misrepresentation or willful omission of facts may result in rejection of my application or termination of my employment.

I hereby authorize the Company to deduct, withhold, or divert from my wages any amounts necessary to offset any damages caused by me or the value of any property or money entrusted to me or owed by me to the Company during the course of my employment with the Company, provided that it does not cause me to receive less than the minimum hourly wage required by state and federal laws.

I agree that I will settle any and all previously unasserted claims, disputes, or controversies arising out of our relating to my application for candidacy for employment, employment, and/or cessation of employment with the Company by final and binding arbitration before a neutral arbitrator. By way of example only, such claims include claims under federal, state, and local statute or common law, such as Age Discrimination in Employment Act, Title VII of the Civil Rights Act of 1964, as amended, including the Amendments of the Civil Rights Act of 1991, the Americans with Disabilities Act, the Law of Contract, and the Law of Tort.

I hereby certify that, if employed, I will report to my manager or other member of management if I am ever harassed by by someone in the Company or if I ever become aware of any unethical behavior by any employee of the Company.

I expressly understand and agree that if employed, my employment (having no specified term), is "at will" and thus is based upon mutual consent and may be terminated at will, with or without cause, by either party (Company or me) without prior notice to the other. I understand that if I want to leave in good standing, I must provide two weeks notice to my supervisor before terminating my employment.

Date

Applicant's Signature

WE TEST FOR DRUGS

Applicant's Printed Name