

2008 Employment Application

Splashway LLC
P.O. BOX 85
5211 Main St.
Sheridan, TX 77475
Ph: (979) 234-7718 Fax: (979) 234-7728

| Last Name | First | Middle | Date of Application | | |
|---|-----------------------------|--|---|--|----------------|
| Mailing Address | | Email: | | Home Phone | |
| City, State, Zip Code | | | Cell Phone | | |
| Date of Birth: | Age: | Driver License #: | Social Security Number | | |
| Position of Employment Desired <input type="checkbox"/> Lifeguard <input type="checkbox"/> Admissions <input type="checkbox"/> Maintenance <input type="checkbox"/> Concessions | | | Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No Proof of Identification will be required upon employment. | | |
| EDUCATION | | | | | |
| Level | Name and Location of School | Diploma or Degree (Credits Earned if No Degree) | Attendance Dates | | Major/Interest |
| | | | From Mo/Yr | To Mo/Yr | |
| Current/Most Recent Education | | | | | |
| Scholastic Achievements: | | | | | |
| SKILLS AND QUALIFICATIONS | | | | | |
| Summarize skills and qualifications acquired from employment or other experiences that are related to the position for which you are applying (e.g. volunteering, athletics, working with people in general): | | | | | |
| EMPLOYMENT HISTORY | | | | | |
| Please provide a COMPLETE employment history, even if a resume is submitted with this application. | | | | | |
| (1) Present/Most Recent Employer Telephone | | Dates Employed | | Summarize the nature of the work performed and job responsibilities. | |
| | | From Mo/Yr | To Mo/Yr | | |
| Address | | | | | |
| Job Title | | Hourly Rate/Salary | | | |
| | | Starting | | | |
| Immediate Supervisor and Title | | \$ | per | | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | | |
| | | Final | | | |
| Reason for leaving or why you are considering leaving? | | \$ | per | | |
| May we contact previous employer for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |

| | | | | |
|--|------------------|-----------------------|-------------|--|
| (2) Next Previous Employer | Telephone | Dates Employed | | Summarize the nature of the work performed and job responsibilities. |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment | | Hourly Rate | | |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Final | | |
| Reason for leaving? | | \$ | per | |

REFERENCES

List three references who are **NOT** related to you and are **NOT** previous supervisors. For example, you may list three school or personal references who are not related to you.

| Name | Telephone | Years Known | In what capacity did this person observe you or your work? |
|------|-----------|-------------|--|
| | | | |
| | | | |
| | | | |

MEMBERSHIPS

List organizations/associations that you have been involved in and any positions you may have held.

| Organization | Offices Held |
|--------------|--------------|
| | |
| | |
| | |
| | |

OTHER INFORMATION

Have you ever been convicted of, or are you now under charges for, any misdemeanor or felony offense? Omit traffic fines, (2) any conviction the record of which has been expunged under federal or state law, and (3) any conviction set aside under the Federal Youth Corrections Act or similar authority. (A yes response will not necessarily disqualify you from employment.) Yes No
If checked yes, please explain below.

Have you ever been employed by Splashway Family Waterpark? Yes No
If yes, when?

Do you have any relatives or friends previously employed by Splashway Family Waterpark? Yes No
Name of employee(s) Business unit where employed

What prompted your application to Splashway Family Waterpark? Ad _____ Friend _____
(Please indicate name of ad/friend/etc.)
Splashway Employee _____ Other _____

***THE FOLLOWING (3RD) PAGE MUST BE SIGNED IN ORDER TO COMPLETE YOUR APPLICATION.**

SIGNATURE AND UNDERSTANDING OF APPLICATION

PLEASE REVIEW THE APPLICATION CAREFULLY. WE WILL NOT CONSIDER THIS APPLICATION IF NOT COMPLETED IN FULL.

PLEASE READ THE FOLLOWING AND SIGN THE APPLICATION IN THE SPACES PROVIDED BELOW. IF YOU HAVE ANY QUESTIONS, PLEASE SPEAK WITH THE GENERAL MANAGER BEFORE SIGNING.

I understand that employment by Splashway LLC and any of its companies is "at will." This means that the employment relationship can be ended by me or by Splashway LCC at any time for any reason with or without advanced notice and with or without cause. It also means that Splashway LLC may revise and make exceptions to its policies, practices, handbooks, manuals, rules, procedures, and regulations, in whole or in part, at any time. I understand that Splashway LLC is a seasonal employer in the amusement/entertainment industry. I further understand that acceptance of an offer of employment does not create a contractual obligation upon Splashway LLC to continue to employ me in the future or for any specific term. Notwithstanding the above, I understand that no representative of Splashway LLC, except the general manager and the owner, have any authority to enter into any agreement of employment for a definite term. Any such agreement must be in writing and signed by the general manager or the owner.

If employed by Splashway LLC, I agree to comply with all safety and health rules, company policies and procedures, and local, state, and federal laws pertaining to my employment. Although management makes every effort to accommodate individual preferences, organizational needs may make the following conditions mandatory: rotating work schedule, or a work schedule other than Monday through Friday or normal business hours. I understand and accept these as conditions of my employment should I be hired.

I have reviewed this application carefully and I hereby affirm that my statements and answers to all questions on this application are true and correct and that I have not knowingly withheld any fact or circumstance that, if disclosed, would affect my application unfavorably. I understand that any misstatement or omission of fact on this application may result in my application not being considered, and, if employed, may result in my immediate dismissal.

I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:

Print Applicant's Name: _____

Signature of Applicant _____ Date _____

INVESTIGATION AUTHORIZATION

By signing below, I hereby authorize Splashway LLC to conduct an investigative report and/or reference check concerning all statements contained in my application for employment; to interview all employers, references, and other individuals and institutions to obtain information and opinions about me; and to conduct any other investigation that it deems appropriate. Such investigation may include but is not limited to my education, employment history (except my current employer if I have so indicated above), character, general reputation, driving record, credit history, and criminal record. In the event that I am employed by Splashway LLC, I hereby authorize Splashway LLC to answer any inquires regarding my employment, conduct, qualifications, and reasons for leaving.

I understand that I have the right to request Splashway LLC to disclose to me, completely and accurately, the nature and scope of the investigation. (Such a request must be made in writing to the general manager within 30 days after you have completed and signed this authorization.)

In exchange for being considered for employment, I hereby release Splashway LLC, its employees, and agents, as well as any law enforcement agency, current or former employer, educational institution, credit agency, or any other individual providing information about me to Splashway LLC, from any liability arising from disclosure of such information that is obtained during said investigation.

Print Applicant's Name _____

Signature of Applicant _____ Date _____