



Application for Employment

Fill out this form, print it and bring it into any Outpost Sports store for consideration!

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date _____ Location applying for: Mish NB SJ SH

Last name _____ First name _____ Middle name _____

Street Address _____

City _____ State _____ ZIP _____

Telephone _____ Cell Phone _____ Email _____

Social Security # _____

Position applied for _____

How did you hear about Outpost Sports? _____

When can you start? _____ Desired Wage \$ _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You will be required to provide documentation.) Yes No

Type of employment desired Full Time Part Time Seasonal

Are there any hours/shifts that you can't work? _____

Are you willing to work weekends & overtime? Yes No

Have you ever been convicted of a felony? (This will not necessarily affect your application.)
 Yes No

If yes, please describe conditions. _____

Education

	School Name and Location	Year	Major	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
College	_____	_____	_____	_____
Post-College	_____	_____	_____	_____
Other Training	_____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider? What Sports are you interested in?

Do you participate in a High School or College Sport? If yes, what are the dates of your season?

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

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Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Personal References: (please list three non family members known for at least one year)

Name _____ Phone Number _____

Email: _____ Address _____

Years Acquainted: _____ Business: _____

Name _____ Phone Number _____

Email: _____ Address _____

Years Acquainted: _____ Business: _____

Name _____ Phone Number _____

Email: _____ Address _____

Years Acquainted: _____ Business: _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is “at will,” which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

Signature _____ Date _____