



10421 Portal Road
Papillion, NE 68128

Position Applying For

Position desired:	Wage Preference:	Todays Date:
Legal name: Last	First	Middle
Street Address:		
Phone Number:	E-Mail Address	
Are you over 18 years of age?	Yes No	If not give Date of Birth / /
Are you legally authorized to be employed in this country?	Yes No	
Do you have any objections to not smoking while on a work shift, on company property or in company uniform? Yes No		
Have you ever been convicted of, pled guilty to or pled no contest to a crime? (Include all infractions, misdemeanors and felonies. Yes No		
Nature of Crime	Date of conviction / /	City, State
Do you have any pending criminal charges against you? Yes No		

Personal References

Please list personal references of at least two people not related to you for whom you have never worked for. This could be someone you are acquainted with (for example a teacher, coach, principal, friend, neighbor. etc.)

Name	Phone	Relationship
1.)		
2.)		
3.)		

Availability

Check the time periods you are available to work. If these times don't work for you please use the space below to tell us your availability.

	Day 10am-4pm Sat. 9am-4pm	Evening 4pm-Close
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

Notes on availability (we can be flexible with shift times):

How do you plan to show outstanding customer service to our guests?

Special training or skills in which make you qualified for this position.

Education

Are you currently enrolled in school Yes No

Schools Attended	School Name	City, State	Number of years attended at this time	Graduated (Circle One)	Field(s) of Study
High School			1 2 3 4 5	YES NO	N/A
College			1 2 3 4 5	YES NO	
Other			1 2 3 4 5	YES NO	

Please list extracurricular activities

Employment History (start with the most present job)

Company Name:		Telephone: ()	
Address: (street, city, state, zip)			
Name and title of supervisor		Employed (month, year) From To	
Your job title and responsibilities:		Compensation (circle one) Start Per Hr. Wk. Yr.	
Reason for leaving:		End Per Hr. Wk. Yr.	
Company Name:		Telephone: ()	
Address: (street, city, state, zip)			
Name and title of supervisor		Employed (month, year) From To	
Your job title and responsibilities:		Compensation (circle one) Start Per Hr. Wk. Yr.	
Reason for leaving:		End Per Hr. Wk. Yr.	
Company Name:		Telephone: ()	
Address: (street, city, state, zip)			
Name and title of supervisor		Employed (month, year) From To	
Your job title and responsibilities:		Compensation (circle one) Start Per Hr. Wk. Yr.	
Reason for leaving:		End Per Hr. Wk. Yr.	

May we contact these employers? Yes No If no, please explain why: _____

Will this be your first job? Yes No

Applicant Statement and Release

The Defy Gravity promotes and enforces an active policy of Equal Employment Opportunity (EEO) for all individuals without regard to race, color, religion, sex, age, national origin, sexual orientation, disability, or any other basis prohibited by law. Defy Gravity's policy relates to all phases of employment, including, but not limited to, recruitment, employment, promotion, transfer, rates of pay, and other forms of compensation, selection for training, use of all facilities, and participation in all Company sponsored employee activities. Furthermore, it is Defy Gravity's policy to comply with all civil rights laws.

Signature of Application: _____

Date: _____

**AGREEMENT TO ALLOW DEFY GRAVITY
TO CONDUCT A REFERENCE CHECK AND REQUEST CONSUMER REPORTS**

DISCLOSURE

In connection with your application for employment or throughout the duration of your employment, Defy Gravity may conduct a reference check and request a consumer report on you.

The reference check, also known as an investigative consumer report, may include information as to your character, general reputation, personal characteristics and mode of living and may include criminal, civil, credit and motor vehicle records, whichever are applicable. This information may be obtained from a variety of sources, including your previous employers and references supplied by you or others. You have the right to request, in writing, within a reasonable time, that we supply you with the sources of such information.

The consumer report will be prepared by an independent background and credit-reporting agency. The consumer report may include, but is not limited to criminal, civil, credit and motor vehicle records, employment, education, social security verification, and any other public records and information bearing on employment suitability, character, general reputation, personal characteristics and trustworthiness. If Defy Gravity actually takes an adverse action against me that is based on information contained in a consumer report, Defy Gravity will notify me of the following: (1) the adverse action taken; (2) that the decision to take adverse action was based in whole or in part on information contained in a consumer report; (3) the name, address and phone number of the reporting agency from which the consumer report was obtained; (4) that the reporting agency did not make the decision to take adverse action against me and cannot provide specific reasons why it was taken; (5) notice of my right to obtain a free copy of my consumer report within sixty (60) days; and (6) notice of my right to dispute the accuracy or completeness of the information in my consumer report with the reporting agency.

AUTHORIZATION:

I have read and understand that Defy Gravity may conduct a reference check and procure a consumer report on me at any time throughout the duration of my employment. I acknowledge that a summary of my rights under the federal Fair Credit Reporting Act (FCRA) is attached to this Agreement for my review.

By signing the release below, I hereby authorize Defy Gravity to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts, and military services to release information about my background including, but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history to Defy Gravity.

I release from all liability all persons, companies, schools supplying such information. I indemnify Defy Gravity against any liability, which may result from making such requests. This release shall remain in effect for the length of my employment. I understand I may have a right to request additional disclosures regarding the nature and scope of the investigation.

I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of this release. I give Defy Gravity permission to conduct these background checks and/or consumer reports.

PRINT CLEARLY

FULL Name as Spelled on Driver's License:

First _____ Middle _____ Last _____

Other names used: _____

Current Street Address: _____

City/State/Zip: _____

Driver's License Number & State: _____

(Signature of Applicant)

(Date)