

Grand Adventure LLC

Employment Application

		App	olicant I	nforma	tion			
Full Name:					Date:			
	Last	Firs	t			M.I.		
Address:	Street Address						Apartment/Unit #	
	Street Address						Apartment/Onit #	f
	City					State	ZIP Code	
Phone:				Email				
Date Availal	ole:							
Positions M								
Desired List	: 							
Are you a citizen of the United States?			NO	If no, ar	e you a	authorized to w	ork in the U.S.?	NO
Are you 16 or older?			NO		ave a river's ense?	YES	NO 🗆	
Have you ever been convicted of a felony?			NO					
If yes, expla	in:							
			Educ	ation				
If you are cu	urrently in process of obtaining	g a degree	e or certif	ication, p	lease i	ndicate with "Pe	ending."	
High School	l:		Address:					
From:	To:	Did you g	raduate?	YES	NO	Diploma:		
College:			Address:					
From:	To:	Did you g	raduate?	YES	NO	Degree:		
Other:			Address:	:				
From:		Did you g	raduate?	YES	NO	Degree:		

Please list any certifications or licenses or special training you may have received. For example, a Serv Safe certification or an IAAPA Manager certification. Please provide a copy of the certification(s) or a way for Grand							
Adventure to verify the certification(s) in your email.							
2.4							
Refere							
Please list three professional references. If you do not ha	ve three, please list character references in place.						
Full Name:	Relationship:						
Full Name: Company:	Di						
Company:	Phone:						
Company:	Phone:						
Company:	Phone:						
Address:	Phone: Relationship:						
Company: Address: Full Name:	Phone:Relationship:						
Company: Address: Full Name: Company:	Phone:Relationship:						
Company: Address: Full Name: Company:	Phone: Relationship: Phone:						
Company: Address: Full Name: Company: Address:	Phone: Relationship: Phone: Phone:						

Previous Employment Being able to contact your previous employers will be required for employment. If you have had no previous employer please indicate "NA". Phone: Company: Supervisor: _____ Address: Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: Reason for Leaving:____ From: To: Phone: Company: Address: Supervisor: ____ Starting Salary:\$ Ending Salary:\$ Job Title: Responsibilities: From: Reason for Leaving: To: Phone: Company: Address: Supervisor:_____ Starting Salary:\$ Ending Salary:\$ Job Title: Responsibilities: From: To: Reason for Leaving: Military Service From: To: ____ Branch: Rank at Discharge: Type of Discharge:

If other than honorable, explain:

Please email a copy of this application and any certifications you wish to provide to grandinfo@penningtonmaterials.com

Please print, sign, and scan the following statement.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I give my previous employers permission to release their employee records pertaining to me to Grand Adventure LLC and its agents.

I also give Grand Adventure LLC and its agents permission to verify my information.

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	ation leads to employment, I understand that false or misleading information in my application or by result in my release.
Signature:	Date: