

## Flying H Entertainment Inc. Employment application

First Name:	Las	t Name		M.I
Date: Street Address:				Apt/Unit:
City:	_ State:	Zip Code:	•	
Date: Street Address: City: Phone:	Email:_			Age:
First Date Available:	S.S	S. no:		
<b>Dept. Applying for (Please circle one):</b> Co Merchandise Store, Race Operations,		EMS spection,	S/Safety Crew, Ticketing,	Fuel & Parts Store, Security
How did you hear about us?				
Are you a citizen of the United States?		Yes □ No □	 ]	
If no, are you authorized to work in the U	l.S.?	Yes □ No □	]	
Have you ever worked for this company?	)	Yes □ No □	If yes, when?	
Have you ever been convicted of a felony	y?	Yes □ No □	If yes, explain?_	
Can you safely lift over 50lbs?		Yes □ No □	]	
Are you able to sit or stand for long perio	ods of time?	Yes □ No □	]	
Are you able to work Weekends or Holida		Yes □ No □	]	
Are you willing to work overtime if necess	sary?	Yes □ No □	]	
Education				
High School:	Years: _		_Did you graduat	e? Yes □ No □ G.E.D. □
College:				
Degree:				
Previous Employment				
	Phone:			
Address:				
Supervisor:				
Responsibilities:				
Military Service				
Branch:	Years:			
Rank at discharge:		Ty	pe of discharge:	
Rank at discharge: If other than honorable, explain:				
Disclaimer and signature I certify that my application leads to employment, I unde interview may result in my release.	y answers are	true and con	mplete to the bes	t of my knowledge. If this
Signature:		Date:		