

FoxHole LLC Gun Range

Date _____

Position(s) Applying For: _____

Part Time

Full Time

Name _____ Social Security No. _____

Last, First, Middle

Present Address _____

City, State, Zip _____

Home Telephone (_____) _____ Business Telephone (_____) _____

Cell Phone (_____) _____ Email Address _____

Are you lawfully authorized to work in the U.S. (citizen, foreign national or lawfully authorized alien)?

Yes No

Have you ever been convicted of a crime other than a simple misdemeanor? A conviction will not automatically disqualify you for employment.

Yes No If yes, please explain: _____

EDUCATION

School	Name & Address of School	Course of Study	List Diploma or Degree
High School / Equivalent			
College or Technical Institute			
Other (specify)			

Relevant certificates, licenses, or special training: _____

National Career Readiness Certificate (NCRC) acknowledged: _____

Relevant skills, abilities, outside interests, and hobbies: _____

PERSONAL REFERENCES

Name & Occupation	Address	Phone Number

EMPLOYMENT HISTORY

CURRENT EMPLOYMENT

1	Company Name _____	Telephone _____
	Address _____	Employed (Month and Year) _____
	_____	From: _____ To: _____
	Name of Supervisor _____	Avg. HoursWorked/Week _____
	Job Title and Work Performed _____	Salary/Wage _____
_____	Reason for Leaving _____	
_____	_____	

PAST EMPLOYMENT BEGINNING WITH YOUR MOST RECENT

2	Company Name _____	Telephone _____
	Address _____	Employed (Month and Year) _____
	_____	From: _____ To: _____
	Name of Supervisor _____	Avg. HoursWorked/Week _____
	Job Title and Work Performed _____	Salary/Wage _____
_____	Reason for Leaving _____	
_____	_____	

3	Company Name _____	Telephone _____
	Address _____	Employed (Month and Year) _____
	_____	From: _____ To: _____
	Name of Supervisor _____	Avg. HoursWorked/Week _____
	Job Title and Work Performed _____	Salary/Wage _____
_____	Reason for Leaving _____	
_____	_____	

4	Company Name _____	Telephone _____
	Address _____	Employed (Month and Year) _____
	_____	From: _____ To: _____
	Name of Supervisor _____	Avg. HoursWorked/Week _____
	Job Title and Work Performed _____	Salary/Wage _____
_____	Reason for Leaving _____	
_____	_____	

5	Company Name _____	Telephone _____
	Address _____	Employed (Month and Year) _____
	_____	From: _____ To: _____
	Name of Supervisor _____	Avg. HoursWorked/Week _____
	Job Title and Work Performed _____	Salary/Wage _____
_____	Reason for Leaving _____	
_____	_____	

We may contact the employers listed above. Indicate by number the employers you would prefer we do not contact.

APPLICANT STATEMENT

Please read and sign below

I authorize FoxHole LLC to make a thorough investigation of my past employment, education and job-related activities as well as inquiry of criminal records. I release from all liability all persons, companies, and corporations supplying such information. I also indemnify FoxHole LLC against any liability which might result from making such investigation. Additionally, I authorize FoxHole LLC to supply my employment record in it's sole discretion, in whole or in part, to any prospective employer, government agency, or other party, with an interest that FoxHole LLC deems appropriate. Falsification or misrepresentation of facts are grounds of immediate dismissal at any time. An incomplete application may not be considered for employment.

Signature of Applicant

Date