



LOCATION APPLYING FOR (select one):

☐ Jacksonville, Florida

☐ Richmond, Virginia

☐ Memphis, Tennessee

EMPLOYMENT APPLICATION FORM

Please print and complete all information below

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:
ADDRESS:	CITY & STATE:	ZIP CODE:
MOBILE:	EMAIL:	
DATE OF BIRTH (mm/dd/yyyy):	SSN: PLEASE PROVIDE THIS WHEN HIRED	GENDER: M: _____ F: _____
DRIVER'S LICENSE #:	STATE OF ISSUE:	EXPIRATION:
EMERGENCY CONTACT NAME:	EMERGENCY CONTACT #:	RELATIONSHIP:
HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES: _____ NO: _____	IF SO, WHAT WAS THE FELONY?	
CURRENT SCHOOL:	EDUCATION LEVEL COMPLETED:	CURRENT GRADE/YEAR:
OTHER LANGUAGES SPOKEN:	POSITION APPLIED FOR: Team Member: _____ Team Leader: _____	SALARY DESIRED:
ANY EXPERIENCE? IF SO, HOW LONG?	HOURS PER WEEK DESIRED:	WHEN AVAILABLE TO START:

Are you a social media creator? Yes: _____ No: _____

If yes, please share the link to your public social profiles or content portfolio.

Based on the profiles above, which "Team Animal" do you feel best represents your natural style?

1. Lion 2. Fox 3. Leopard 4. Bear

Do you know any team members who are currently working at Lululand?

If yes, please list names _____ Relationship: _____

AVAILABLE TIME TO WORK

MON	TUE	WED	THU	FRI	SAT	SUN

WORK EXPERIENCE

Please list your work experience, beginning with your most recent job held. If you were self-employed, give firm name.

COMPANY NAME:	NAME OF EMPLOYER/SUPERVISOR:	EMPLOYED DATE FROM: _____ TO _____	
ADDRESS:	CITY & STATE:	ZIP CODE:	PHONE #:
EMAIL:	JOB TITLE:	SALARY:	HOURS PER WEEK WORKED:
REASON FOR LEAVING:			
LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED WHILE YOU WORKED AT THIS COMPANY:			

COMPANY NAME:	NAME OF EMPLOYER/SUPERVISOR:	EMPLOYED DATE FROM: _____ TO _____	
ADDRESS:	CITY & STATE:	ZIP CODE:	PHONE #:
EMAIL:	JOB TITLE:	SALARY:	HOURS PER WEEK WORKED:
REASON FOR LEAVING:			
LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED WHILE YOU WORKED AT THIS COMPANY:			

FORM WAIVER: Please Read Carefully

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Lululand Adventure Park permission to contact schools, previous employers, and others, and hereby release Lululand Adventure Park from any liability as a result of such contract.

Both the undersigned and Lululand Adventure Park may end employment relationship at any time, without specified notice or reason. If employed, I understand that Lululand Adventure Park may unilaterally change or revise their benefits, policies and procedures, and such changes may include reduction of benefits.

I understand that my employment with the company shall be probationary for **a period of 60 days**, and further that at any time during the probation period or thereafter, my employment relation with the Lululand Adventure Park is terminable at will for any reason by either party.

This application and the above waiver apply to the Lululand Adventure Park location selected on this application. Any employment offered is subject to the policies and procedures of that location and the applicable federal, state, and local laws governing employment at that location.

SIGNATURE OF APPLICANT: _____ DATE: _____

Lululand Adventure Park is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. Thank you for completing this application form and for your interest in our business.