1601 East Maple Road Clare, MI 48617 (W) 989-386-2221



www.SoundProductions.com Sales@soundproductions.com (F) 989-386-0460

## **Application for Employment**

Instructions: Please fill out the application completely, even if you attach a resume. Please be aware that applications can only be accepted for current openings. Qualified applicants will receive equal consideration. No question is asked for the purpose of excluding any applicant on the basis of race, color, national origin, religion, age, sex, disability, or any other factor prohibited by law or regulation. Sound Productions Entertainment (and it's subsidiaries) is an equal opportunity employer.

| PERSONAL INFORMAT                   | TION                  |                  |  |                        |                       |                    |                        |                  |  |
|-------------------------------------|-----------------------|------------------|--|------------------------|-----------------------|--------------------|------------------------|------------------|--|
| Name (Last, First, M.I.):           |                       |                  |  | Date:                  |                       |                    |                        |                  |  |
| Current Street Address:             |                       |                  |  | City:                  |                       | State:             | Zip:                   |                  |  |
| Cell Number:                        |                       |                  | Email:   | Email:                 |                       |                    | Referred By:           |                  |  |
| Social Security Number:             |                       |                  | Do you have a Yes Drivers Livers Livers License? |                        |                       | L<br>cense Number: |                        |                  |  |
| PREFERENCES                         |                       |                  |  |                        |                       |                    |                        |                  |  |
| Desired Start Date:                 | Willing to T          | ravel?           | Desired Work Days (circle all that apply):       |                        |                       | pply):             | Can you work holidays? |                  |  |
|                                     | Yes No                |                  |  | Mon Tues Wed Thui      |                       |                    | Yes                    | No .             |  |
| Desired Hrs per Wk?                 | Min Pay Accepted?     |                  | Can you wo                                       | Can you work overtime? |                       | Can you w          | Can you work nights?   |                  |  |
| ·                                   |                       |                  | Yes No   |                        |                       |                    | Yes No                 |                  |  |
| Have you ever applied at SP before? |                       |                  | If yes, when?                                    |                        | Have you worked for S |                    | P before?              | If yes, when?    |  |
| Yes No                              |                       |                  |  | Yes No                 |                       |                    |                        |                  |  |
| EDUCATION AND                       |                       |                  |  |                        |                       |                    |                        |                  |  |
| TRAINING                            |                       |                  | //State # Yrs A                                  |                        | Attended Did          |                    | ı graduate?            | Studied? Degree? |  |
| High School                         |                       |                  |  |                        |                       |                    |                        |                  |  |
| College or University               | College or University |                  |  |                        |                       |                    |                        |                  |  |
| WORK REFERENCES (F                  | Please provid         | de three)        |  |                        |                       | •                  |                        | -                |  |
|                                     |                       | ompany and Title |  | Telephone Number       |                       | Email Address      |                        |                  |  |
|                                     |                       |                  |  |                        |                       |                    |                        |                  |  |
|                                     |                       |                  |  |                        |                       |                    |                        |                  |  |
|                                     |                       |                  |  |                        |                       |                    |                        |                  |  |

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## **Application for Employment Continued**

## EMPLOYMENT HISTORY (Please DO NOT indicate "see resume")

Give a complete account of your employment, including salary history. Begin on the first line with your present or most recent position. Please attach an additional sheet if necessary. If there are breaks in employment, please explain why.

| Month/Year Started                             | Name, Address, Phone of Employer                                  | Sta               | rting Salary | Position/Duties     | Reason f   | or Leaving |
|--|---|-------------------|--------------|---------------------|------------|------------|
| Month/Year Ended                               | -   | End               | ding Salary  | 1                   | Superviso  | ors Name   |
| What did you like about                        | What did you dislike about this job?                              |                   |              |                     |            |            |
| Month/Year Started                             | Name, Address, Phone of Employer                                  | Sta               | rting Salary | Position/Duties     | Reason f   | or Leaving |
| Month/Year Ended                               | -   | Enc               | ding Salary  | -                   | Superviso  | ors Name   |
| What did you like about                        | this job?   | What did you o    | lislike abo  | out this job?       |            |            |
| Month/Year Started                             | Name, Address, Phone of Employer                                  | Sta               | rting Salary | Position/Duties     | Reason f   | or Leaving |
| Month/Year Ended                               | -   | Enc               | ding Salary  | _                   | Superviso  | ors Name   |
| What did you like about                        | this job?   | What did you o    | lislike abo  | ut this job?        |            |            |
| EMPLOYMENT QUEST                               | IONNAIRE  | 1                 |              |                     |            |            |
| Are you at least 18 year                       | ars old? Yes  | No                |              |                     |            |            |
| If requested, would yo                         | ou be willing to take a drug/alcoho                               | l test as a cond  | ition of e   | employment?         | Yes        | No         |
| Can you provide proof                          | f of U.S. citizenship or, if an alien, p                          | roof of author    | ization to   | work in the U.S.?   |            |            |
| , , ,  | Yes No  |                   |              |                     |            |            |
| Have you ever been co                          | onvicted of a crime other than a m                                | inor traffic viol | ation?       | Yes                 | No         |            |
| •  | details of the crime and sentence.                                |                   |              | t automatically bar | employment | :.)        |
| CERTIFICATE OF APPLI                           | CANT (Read carefully before signir                                | ng)               |              |                     |            |            |
| All the Community of the state of the state of | and a final and a constant that the about a final about a final a |                   | . •          |                     |            |            |

All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may result in rejection of my application or if employed, may result in the subsequent dismissal. I hereby authorize all former employers, educational institutions, personal references and others identified hereon, including their employees or representatives, to furnish or provide full and complete reports, documents or information to Sound Productions or its representative concerning my prior educational and work histories, criminal and driving records, or other information I have provided hereon. I waive, release, indemnify and hold harmless Sound Productions, its subsidiaries or affiliate companies, employees and representatives and all other persons or entities from all liability and all claims of any nature whatsoever pertaining to the disclosure or use of information or written material as described above. I understand this is a preliminary application and not a contract to employ me. Furthermore, in the event I am employed, my employment shall be completely voluntary and may be terminated at will at any time. I understand that any employment agreement to the contrary must be in writing and approved by the company's owner. If employed, I agree to comply with all rules of the company as a condition of continued employment.

| Date: | Applicant Signature: |  |
|-------|----------------------|--|
|       | 11 0                 |  |