**Job Application**

**Forest of Fear Drive LLC**

13451 FM 2025 Rd, Cleveland, Texas 77325

346-402-5697

Forest of Fear Drive LLC is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

*Please fill out all of the sections below:*

**Applicant Information**

 ***Applicant Name:*** 

 ***Date of Birth:*** 

 ***Address:*** 

 ***City, State and Zip Code:*** 

 ***Telephone Number:*** 

 ***Email Address:*** 

 ***Date of Application:*** 

**Employment Positions Available*:*** Actor/Haunter (part time)

 Are you available to work every weekend from September 24th – October 31st Yes No

 Are you available to work from 6:30pm – 12:00am each night? Yes No

 Are you available to work overtime if needed? Yes No

 Do you have reliable transportation? Yes No

 Are you able to stand for long periods of time? Yes No

 Are you able to work outdoors? Yes No

**Personal Information**

 Are you 18 years of age or older? Yes No

 If not, what is your age? 

 Are you a U.S. citizen or approved to work in the United States? Yes No

 Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

 If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:









**Job Skills/Qualifications**

Please list below the skills and qualifications you possess for the position for which you are applying:









**Education and Training**

| **High School Name** | **Location** | **Year Graduated** | **Degree Earned** |
| --- | --- | --- | --- |
|  |  |  |  |

| **College/Vocational School** | **Location** | **Year Graduated** | **Degree/Certification Earned** |
| --- | --- | --- | --- |
|  |  |  |  |

**Previous Employment 1 2**

| **Employer Name:** |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Supervisor Name: |  |  |
| Employer Address: |  |  |
| City, State and Zip Code: |  |  |
| Employer Telephone: |  |  |
| Dates Employed: |  |  |
| Reason for leaving: |  |  |

**References**

Please provide 3 personal and professional references below:

| Name | Phone Number | Relationship |
| --- | --- | --- |
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***AT-WILL EMPLOYMENT***

The relationship between you and the Forest of Fear Drive LLC is referred to as “employment at will.” This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Forest of Fear Drive LLC. No representative of Forest of Fear Drive LLC has authority to enter into any agreement contrary to the foregoing “employment at will” relationship. You understand that your employment is “at will”, and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Company’s Owners.

Applicant Signature: Date: