



Employment Application

Application Date _____

Last Name	First Name	Middle
Street Address	City, State, Zip	(____) _____ (____) _____ Home Phone Other Phone
Email Address		

Have you previously applied for a position or worked for our Company? yes no (If yes, please list dates and location of previous employment):

<p>If given a conditional offer can you:</p> <p>-Furnish proof that you are at least 18 years of age or, if under 18, eligible for employment? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>-Furnish proof that you are eligible for employment in the United States? <input type="checkbox"/> yes <input type="checkbox"/> no</p>	<p>If given a conditional offer, please be aware that for certain positions, additional verifications may be required, including pre-employment drug testing, criminal background checks, and motor vehicle record reports.</p>
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Are there any special circumstances necessary for you to perform the job for which you are applying? yes no (If yes, please explain):

EMPLOYMENT DESIRED

Position Desired	# hrs/wk and days of the week you are available	Start Date
Secondary Position	# hrs/wk and days of the week you are available	Start Date

EDUCATION

Circle highest grade or # of years completed	Grade School 4 5 6 7 8	High School 9 10 11 12	Jr College 1 2 3	College 1 2 3 4 5 6 7
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High School	City, State, Zip	Graduate?	Diploma
College	City, State, Zip	Graduate?	Diploma or Degree
Other School	City, State, Zip	Graduate?	Diploma or Degree

Summarize any experience, knowledge, skills, abilities, or specialized training you would like us to know about:



EMPLOYMENT HISTORY (List most recent employer first. This section must be completed even if a resume is attached)

From: _____ **To:** _____ **Company Name:** _____

Reason For Leaving: _____

Position Held: _____ **City, State, Zip:** _____

Phone Number: _____ **Supervisor Name:** _____ **May we contact this employer?** Y N

From: _____ **To:** _____ **Company Name:** _____

Reason For Leaving: _____

Position Held: _____ **City, State, Zip:** _____

Phone Number: _____ **Supervisor Name:** _____ **May we contact this employer?** Y N

From: _____ **To:** _____ **Company Name:** _____

Reason For Leaving: _____

Position Held: _____ **City, State, Zip:** _____

Phone Number: _____ **Supervisor Name:** _____ **May we contact this employer?** Y N

Please account for any periods of unemployment in the space provided below:

From: _____	Explanation: _____
To: _____	_____
From: _____	Explanation: _____
To: _____	_____

In order to select the best possible candidate for employment, it is the policy of KemperSports Management to verify all of the statements you make on your application, including those regarding your employment history and your academic background (where this is a job requirement).

PLEASE READ AND INITIAL EACH SECTION LISTED BELOW

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that falsification of information requested in this document or omission of information may disqualify me from further consideration for employment, or, if discovered after I am hired, may result in my immediate discharge from employment. _____ (Applicant's Initials)

I authorize investigation of all statements contained herein and references listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing same to you. _____ (Applicant's Initials)

I understand and agree that this Employment Application does not constitute a contract of employment, and that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time for any or no reason, with or without prior notice. I also understand and agree that, if hired, the terms and conditions of my employment may be changed, with or without notice, at any time by Kemper Sports Management absent an enforceable, executed, written agreement to the contrary. _____ (Applicant's Initials)

I understand that if selected for employment with the Company, I may be required to participate in a pre-employment drug testing program at a company authorized, licensed medical facility which includes screening for the presence of controlled substances. I understand that the results will be kept strictly confidential. I hereby release Kemper Sports Management, any employees or agents thereof from any and all claims or causes of action resulting therefrom. _____ (Applicant's Initials)



Applicant Signature: _____

Date: _____

KemperSports is an Equal Opportunity Employer dedicated to a policy of non-discrimination in employment on any basis including age, sex, race, color, creed, ancestry, religion, disability, national origin, citizenship status, veteran status, marital status, military status, sexual orientation, pregnancy, medical condition or any non-job or non-business related factors or any other basis upon which discrimination is prohibited by the municipal, state, or other federal law. No question on this application is intended to secure information to be used for such discrimination.



**FAIR CREDIT REPORTING ACT (FCRA) DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Disclosure

Kemper Sports Management, Inc. (the “Company”) may request from a consumer reporting agency and for employment-related purposes, a “consumer report(s)” (commonly known as “background reports”) containing background information about you in connection with your employment, or application for employment, or engagement for services (including independent contractor or volunteer assignments, as applicable).

HireRight, LLC (“HireRight”) will prepare or assemble the background reports for the Company. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, www.hireright.com.

The background report(s) may contain information concerning your character, general reputation, personal characteristics, or mode of living,. The types of background information that may be obtained include, but are not limited to: criminal history; litigation history; motor vehicle record and accident history; social security number verification; address and alias history;; verification of your education, employment and earnings history; professional licensing, credential and certification checks; drug/alcohol testing results and history; military service; and other information.

Authorization

I hereby authorize Company to obtain the consumer reports described above about me.

Applicant Name _____

Applicant Signature _____

Date _____