



SERVICE SYSTEMS ASSOCIATES

FOOD SERVICE AND MERCHANDISING FOR ZOOS AND AQUARIUMS

APPLICATION OF EMPLOYMENT

SERVICE SYSTEMS ASSOCIATES IS AN EQUAL OPPORTUNITY EMPLOYMENT COMPANY. WE ARE DEDICATED TO A POLICY OF NONDISCRIMINATION IN EMPLOYMENT ON THE BASIS OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, DISABILITY, HEIGHT, WEIGHT, MARITAL STATUS OR OTHER PROTECTED CLASSIFICATION.

Please answer each question unless specifically prohibited by state law.

Personal Data Date: _____ Position Applying for _____

Last Name		First Name		(M.I.)		
Home Address	Apt. #	City	State	Zip Code	Dates of Residency	
Home Telephone () ()	Cell Phone () ()	Are you 18 years or older? <input type="checkbox"/> YES <input type="checkbox"/> NO		If under 18, what is your current age? _____	If under 18, do you have a valid work permit? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Dates available to start:		Days and Hours available S M T W Th F S A.M. P.M. or both				
Are you available to work Memorial Day weekend?		<input type="checkbox"/> YES <input type="checkbox"/> NO		Are you available to work 4th of July Weekend? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Are you available to work Labor Day weekend?		<input type="checkbox"/> YES <input type="checkbox"/> NO				
How did you hear about this job: (circle one)		Internet	Friend	School	Current Employee _____	Other _____
Have you ever worked for Service Systems Associates before?		<input type="checkbox"/> YES <input type="checkbox"/> NO				
Have you ever worked for the Detroit Zoo before?		<input type="checkbox"/> YES <input type="checkbox"/> NO				
Can you perform the essential functions of the job in which you wish to be employed with or without accommodation? <input type="checkbox"/> YES <input type="checkbox"/> NO Explain, if needed						

Do you have a valid drivers' license? <input type="checkbox"/> YES <input type="checkbox"/> NO						
Have you ever been convicted of a crime? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, describe in detail. Disclosure of criminal record does not automatically disqualify you from employment consideration.						

Are there any felony charges pending against you? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, describe in detail. Disclosure of criminal record does not automatically disqualify you from employment consideration.						

Account for all periods of unemployment during the last five years in your employment history						

Are you either a United States citizen or an alien who has the right to work in the job for which you are applying? <input type="checkbox"/> YES <input type="checkbox"/> NO Pursuant to the Immigration Reform and Control Act of 1986, if you are hired you must produce, within 72 hours, documents which are specified by the federal government, establishing and authorization for employment in the United States.						

Education List highest level of education acquired.

GED: <input type="checkbox"/> YES <input type="checkbox"/> NO Date received _____			
School name	School address	# years attended	Graduated ?
High School	Address _____ City _____ State _____ Zip Code _____		
College or Technical School	Address _____ City _____ State _____ Zip Code _____	Degree/Major	
Trade or Graduate School	Address _____ City _____ State _____ Zip Code _____	Degree/Major	

Employment History

List present and past employment, beginning with most recent. (Include military service.)

May we contact Present Employer? YES NO

Dates	Employer	Duties	Pay Rate	Reason for Leaving
Current/Most Current From: _____ To: _____	Name _____ Address _____ City _____ State _____ Zip Code _____		Start: _____ \$ _____ Finish: _____ \$ _____	
Telephone () _____		Supervisor Name and Title _____		

May we contact Previous Employer? YES NO

Dates	Employer	Duties	Pay Rate	Reason for Leaving
Previous Job From: _____ To: _____	Name _____ Address _____ City _____ State _____ Zip Code _____		Start: _____ \$ _____ Finish: _____ \$ _____	
Telephone () _____		Supervisor Name and Title _____		

May we contact Previous Employer? YES NO

Dates	Employer	Duties	Pay Rate	Reason for Leaving
Previous Job From: _____ To: _____	Name _____ Address _____ City _____ State _____ Zip Code _____		Start: _____ \$ _____ Finish: _____ \$ _____	
Telephone () _____		Supervisor Name and Title _____		

References

(At least 2 references must be completely filled before an application can be processed.)

Name _____	Home phone () _____
Address _____	Business phone () _____
Business Address _____	Years Known _____ Socially _____ Professionally _____
City _____	Title _____
State _____ Zip Code _____	
Name _____	Home phone () _____
Address _____	Business phone () _____
Business Address _____	Years Known _____ Socially _____ Professionally _____
City _____	Title _____
State _____ Zip Code _____	
Name _____	Home phone () _____
Address _____	Business phone () _____
Business Address _____	Years Known _____ Socially _____ Professionally _____
City _____	Title _____
State _____ Zip Code _____	

It is understood and agreed that any misrepresentation or omission by me in this application will be sufficient cause for cancellation of this application or separation from the service of Service Systems Associates (SSA) if I have been employed. Furthermore, I understand and agree that, if I am hired, my employment with SSA will be at-will, and may be terminated by me or by SSA with or without notice or cause. I also understand that if hired, from time to time I may receive pay increases, bonuses, promotions, evaluations, demotions, discipline and the like, none of which is intended to alter the at-will nature of my employment. I understand that this arrangement may be changed only in writing when signed by me and the General Manager of Service Systems Associates at the Detroit Zoo.

If I am hired, I agree to abide by the rules of SSA. I agree to be available for overtime and work on weekends and holidays when scheduled by SSA. I understand that failure to do so would be grounds for disciplinary action up to and including termination. This application is current for 180 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to fill out a new application.

I agree that any claim or lawsuit, including, but not limited to, claims or lawsuits arising under federal or state civil rights laws, relating to my employment and/or application for employment with SSA must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

Signature of Applicant _____

Date _____