



APPLICATION FOR EMPLOYMENT

We are pleased that you are interested in applying for a position with our company. WY Horse Racing LLC does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, age, or disability. No question on this form is intended to secure information to be used for such discrimination. We will give this application every consideration. However, by accepting this application, WY Horse Racing LLC makes no commitment of employment to the applicant.

PERSONAL INFORMATION

DATE

LAST NAME: _____ FIRST NAME: _____ M.I. _____

PRESENT ADDRESS: _____
STREET CITY STATE ZIP

PERMANENT ADDRESS: _____
STREET CITY STATE ZIP

PHONE NO.: _____ ARE YOU 21 YEARS OR OLDER? YES NO

D.O.B. _____

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

PLEASE LIST NAME AND RELATION OF ANY FAMILY MEMBERS CURRENTLY WORKING AT WHR LLC: _____

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START? _____

OTHER POSITION IN WHICH YOU ARE INTERESTED? _____ AVAILABLE SHIFTS? _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

EVER APPLIED AT WHR LLC BEFORE? YES NO WHERE? _____ WHEN? _____

EDUCATION	NAME & LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

PROFESSIONAL LICENSE OR CERTIFICATE: _____

HAVE YOU EVER SERVED AN APPRENTICESHIP? IF SO, WHAT TRADE? _____

PHYSICAL LIMITATIONS:

Can you lift 50 lbs or more?	Circle one:	YES	NO				
Are you able to sit or stand for long periods of time?	Circle one:	SIT: YES	NO	STAND: YES	NO		

U.S. MILITARY	RANK	PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES
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FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH MOST RECENT)

EMPLOYER'S NAME AND ADDRESS AND PHONE #	DATE EMPLOYED		POSITION TITLE
	FROM	TO	
			NAME & TITLE OF SUPERVISOR
	SALARY		REASON FOR LEAVING
	START	FINISH	
EMPLOYER'S NAME AND ADDRESS AND PHONE #	DATE EMPLOYED		POSITION TITLE
	FROM	TO	
			NAME & TITLE OF SUPERVISOR
	SALARY		REASON FOR LEAVING
	START	FINISH	
EMPLOYER'S NAME AND ADDRESS AND PHONE #	DATE EMPLOYED		POSITION TITLE
	FROM	TO	
			NAME & TITLE OF SUPERVISOR
	SALARY		REASON FOR LEAVING
	START	FINISH	

USE THIS SPACE FOR DESCRIBING ANY SPECIAL SKILLS OR QUALIFICATIONS AND CONTRIBUTIONS MADE TO FORMER EMPLOYERS OR FOR ANY OTHER COMMENTS YOU CONSIDER PERTINENT

REFERENCES: GIVE THE NAMES OF THREE PERSONS *NOT RELATED TO YOU*, WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

NAME	PHONE NUMBER	BUSINESS	YEAR ACQUAINTED

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME NOT INCLUDING A TRAFFIC VIOLATION? IF YES, PLEASE EXPLAIN:
