



Please return application to
 1941 Newport Blvd, Costa Mesa
 or email to
 info@SlashersAxeThrowing.com

Application Date: _____

PERSONAL

Name (First, Middle, Last) _____

Address _____ City _____ State _____ Zip _____

Cell Phone _____ Email address _____

Are you RBS certified? Yes No How did you hear about this position? _____

If selected for employment are you willing to submit to a pre-employment drug screening test? Yes No

EDUCATION

| School Name | City/State | Years Attended | Degree Received |
|-------------|------------|----------------|-----------------|
| | | | |
| | | | |
| | | | |

EMPLOYMENT

Employer: _____

Work Phone: _____ Dates Employed: _____

City: _____ State: _____ Zip: _____

Position: _____

Duties Performed: _____

Supervisors Name and Title: _____ May we contact them? Yes No

Reason for leaving: _____

Employer: _____

Work Phone: _____ Dates Employed: _____

City: _____ State: _____ Zip: _____

Position: _____

Duties Performed: _____

Supervisors Name and Title: _____ May we contact them? Yes No

Reason for leaving: _____

PROFESSIONAL REFERENCES

| Name | Phone Number | Relationship to you | City/ State |
|------|--------------|---------------------|-------------|
| | | | |
| | | | |
| | | | |

LIST THE HOURS YOU ARE AVAILABLE TO WORK IN THE SPACES BELOW (our shifts can last until 1am)

| Day | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|------|--------|---------|-----------|----------|--------|----------|--------|
| From | | | | | | | |
| To | | | | | | | |

ADDITIONAL INFORMATION

On the back of this page or another paper, please describe any relevant experience you have and why you are interested in working at Slashers Axe Throwing & Ales.

By signing below you certify that all answers given herein are true and completed to the best of your knowledge.

Signature of Applicant _____ Date _____