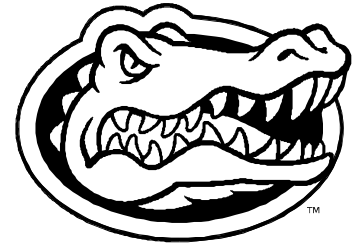


University Athletic Association, Inc.



Employment Application

Instructions:

Please print all information ↑ Be sure to sign the last page ↑ Do not leave blanks or application will not be accepted.

Incomplete applications will not be accepted, even if resume is enclosed.

Today's Date: _____

The University Athletic Association, Inc. (UAA) is an equal opportunity employer. Employees are chosen on the basis of ability and qualifications without regard to race, color, religion, sex, age, national origin, marital status, or disability in compliance with federal, state, and municipal laws.

Position(s) of Interest: _____

Last Name _____ First Name _____ MI _____ Mr. Ms.

Home Address (Street & No.) _____ City _____ State _____ Zip _____

Home Telephone ____/____ Daytime Telephone ____/____ Best Time To Call _____

Other Telephone ____/____ Type (ie: beeper, mobile, etc.) _____ E-Mail _____

How did you become aware of this position?

- Jobline
- Magazine/Journal Ad _____
- UAA Employee _____
- Internet Posting
- Employment Agency _____
- Newspaper _____
- Job Posting Board
- Walk-In _____
- Other _____

Are you legally eligible to work in the U.S.? Yes No

If applicable indicate work authorization expiration date _____

Are you able to perform the essential functions of the position(s) for which you are applying with or without reasonable accommodation? Yes No Unable to determine at this time

At the time of interview you will be provided a complete job description which includes the essential functions of the position, and you will have ample opportunity to ask questions.

Have you previously been employed by the UAA? Yes No

If Yes, indicate date, position, and location _____

Were you employed under the same name? Yes No If No, give name _____

Do you have any relatives (blood or marriage) employed at the UAA? Yes No

If Yes, list names and departments _____

**Note: You will not be hired in a position where you would supervise or be supervised by a relative*

Do you have a valid Driver's License? Yes No

Have you ever been convicted, pleaded "nolo contendere", or had adjudication withheld for any crime or offense other than a minor traffic violation? Yes No If Yes, please provide the following: (If more than one conviction, please list additional conviction history on the second page under Additional Comments.)

Offense	Date	County	State	Court	Disposition
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Conviction of a crime will not necessarily deny employment. Factors such as age at time of offense, type of offense, remoteness of offense, sentenced time, and rehabilitation will be taken into account in determining effect of suitability for employment.

Employment Record Form

Name _____

List other names under which you have been employed _____

May we contact your current employer for references? Yes No

Have you ever been fired or forced to resign? Yes No If Yes, list reason(s): _____

Work History Information

- List all employment, starting with your present or most recent position
- You may submit a resume **in addition** to this application
- Answer all questions in full

Name of Employer	Dates employed (Mo/Day/Yr) From: _____ To: _____	Your Title	Starting Salary	Ending Salary
Address of Company (Include city, state, and zip)		Number of People You Supervised	Name and Title of Your Supervisor	
Area Code/Telephone of Company	<input type="radio"/> Full Time <input type="radio"/> Part Time	Describe Your Work in Detail:		
Machines You Used in Your Work		Reason for leaving		

Account for periods of unemployment between positions:

Name of Employer	Dates employed (Mo/Day/Yr) From: _____ To: _____	Your Title	Starting Salary	Ending Salary
Address of Company (Include city, state, and zip)		Number of People You Supervised	Name and Title of Your Supervisor	
Area Code/Telephone of Company	<input type="radio"/> Full Time <input type="radio"/> Part Time	Describe Your Work in Detail:		
Machines You Used in Your Work		Reason for Leaving		

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Address of Company (Include city, state, and zip)		Number of People You Supervised	Name and Title of your Supervisor	
Area Code/Telephone of Company	<input type="radio"/> Full Time <input type="radio"/> Part Time	Describe Your Work in Detail:		
Machines You Used in Your Work		Reason for Leaving		

Are you interested in:

- Regular
- Temporary

Are you interested in:

- Full-time
- Part-time
- OPS

What is your availability to work:

- Days
- Evenings
- Weekends
- Any

The EEOC portion of the information on the reverse side of this form is being gathered for the purpose of reporting data to the Equal Employment Opportunity Commission. This information will not be kept with your employment application.

Applicant's Agreement

I certify that the information contained in this application is completely correct to the best of my knowledge. I agree that any misleading, false, or omitted information is cause for rejection of this application and is cause for dismissal after employment, regardless of when such false or omitted information is discovered.

The UAA has my permission to obtain all necessary information concerning my background and prior employment from the references and previous employers I have listed, or other sources, including but not limited to credit reporting agencies, driver's license check, FDLE and other law enforcement agencies. I reserve the right to know the names and addresses of any investigative agencies used, in order that I may learn the information contained in any reports furnished to the UAA. I authorize my past employers with whom I have been employed or worked and all listed references to answer all questions concerning me, and to release any and all previous employment records. I release all parties from any possible damages resulting from disclosure of any information concerning me with/without prior written notice from me. I further understand that employment with the UAA is contingent upon the receipt of satisfactory employment and/or personal references, and satisfactory results on criminal background and credit checks.

I understand that this application does not constitute an employment contract of any kind, nor a promise of future employment. Should I be offered employment by the UAA, I will be an at-will employee. I may resign such employment at any time at my discretion with or without prior notice. The UAA may terminate or modify my employment relationship at their sole discretion with or without cause and with or without prior notice and are only liable for wages earned as of the date of termination. I agree to submit to health physicals and/or laboratory tests as required by federal, state, or local law or at the directive of the UAA. I also understand and agree that once employed, the UAA may require drug and alcohol testing in accordance with UAA policy. If an offer of employment is extended, I understand it is my responsibility to read the Employee Handbook and abide by all present and subsequently issued or modified personnel policies.

Date: _____ Applicant's Signature: _____

Print Name: _____



EQUAL OPPORTUNITY INFORMATION

This company is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, our company invites applicants to voluntarily self identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to an adverse decision on your application. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws.

Racial/Ethnic Data:

- Black (Non-Hispanic)
- Native American Indian or Alaskan
- Asian/Pacific Islander
- Hispanic
- White (Non-Hispanic)

Sex:

- Female
- Male