

STUDENT SUMMER EMPLOYMENT APPLICATION

Office Use Only:

QB Date:

Age: ______Wage: ______

675 E. Capital Ave. • Bellevue • MI • 49021

PERSONAL INFORMATION				
Name:	Date of Birth:			
Address:	City:	Zip:		
BEST Phone # :	Cell	Home) If cell, i	s it ok to text you?	
This position requires weeker	nd availability. Do	you understand and	agree to that?	Yes
Availability: We will contact you with dates approximately 2 weeks out, and confirm week of event.				
NOTE ANY WEEKENDS YO	U ARE NOT AVAII	_ABLE:		
Are you able to lift 50 pounds	s or more?	YesNo	3	_
School you most recently atte		Ph	none:	
Last Grade Completed: Now Enrolled?Yes	GPA:			-
Sports or Summer Activities:	0		*	
Most Recent Job: (if not appl	icable, work perfor	med on a voluntary	basis or personal int	erests)
Company:		Location:		
Job:	Phone:	Hourly Pay:		
During the Past 3 years, have you ever been convicted of a crime, excluding misdemeanors?				
Yes No				
If Yes, please describe fully:				
*A conviction will not necessarily bar you from employment.				

- 1. I certify that the information contained in this application is correct to the best of my knowledge and understand that any omission or erroneous information is grounds for dismissal in accordance with Fun Services' policy.
- I authorize the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.
- 3. I acknowledge that Fun Services reserves the right to amend their policies at any time, without prior notice. These policies do not create any promises or contractual obligation between Fun Services and its employees. At Fun Services, my employment is at will. This means I am free to terminate my employment at any time, for any reason, with or without cause, and Fun Services retains the same rights.
- 4. I understand that the use of illegal drugs is prohibited during employment. (this includes vaping/smoking as a minor)
- 5. My parents/legal guardians and I have read and understand all information and guidelines pertaining to my work.

DATE:	_ SIGNATURE OF APPLICANT:
DATE:	SIGNATURE OF PARENT/GUARDIAN:
DATE.	SISTATION CONTROL OF TAXABLE PARTY.
16 and 17 year old –	Attach completed yellow work permit

14 or 15 year old – Attach completed horizontal pink work permit

We are an equal employment opportunity company. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, age, sex, religion, national origin, height, weight, marital status or disability.



Guidelines for Fun Services Summer Workers

675 E. Capital Ave. Bellevue, MI 49021 Phone 269-763-9601 funeventswithus@gmail.com

Your Work Schedule - We will call you with the days/events and **approximate** work time 2-3 weeks in advance.

- ❖ Let us know if you can or cannot work on those days. Text 763-9601: Leave your full name-FIRST AND LAST-and phone number.
- ❖ We always call you 24-48 hours before the day you work and give you the final leave time, event location and estimate return time.
- ❖ Event Day Be at the warehouse at the appointed time Rain or Shine.
 - We Recommend you bring: a Jacket (even if it's warm here, it may be cold where you're going); Lunch, Snacks and plenty to drink (food and water are not provided), and sunscreen since you could be standing in the sun all day.
 - ➤ At the warehouse you will be given a Fun Services shirt.
- ❖ Dress Code Just like McDonald's or Burger King, we have a "uniform" See Below
 - ➤ Long hair must be tied back BEFORE you leave the warehouse (males and females)
- Clean and Neat Appearance is a must! If you are not in acceptable attire, you will be asked to change or be dismissed from the event (without pay).
- ❖ Cell Phones Allowed to use during the travel time to events. <u>CAN NOT</u> be used during event (<u>including</u> Set up and Tear down) We suggest you update your parents when you arrive to the event location of when you'll be able to respond to texts.
- Most Importantly Don't forget your SMILE!!
- ❖ Smoking & Vaping Minors are not allowed to smoke during employment it is illegal. Adults (21+ years) – smoking is NOT allowed in Fun Services vehicles, building or at event workstations. Venues may also be non-smoking.
- ❖ At the Event-Upon arrival to the event, your supervisor will instruct you on what you should do to assist with set-up. Cell phone use is NOT permitted during the event including set up and take down (Please keep in car). During the event, remember to be polite, friendly and helpful to the guests. Pay special attention to small children.
- ❖ Getting Paid-Pay Checks will be ready for pick up on Wednesday <u>after</u> noon. Checks not picked up by Friday will be mailed unless you are scheduled to work the following weekend.







PARENT CONSENT FOR _____

, have read the work guidelines & have signed the work permit. My child and I understand that the work sites are within ½ - 3 hours drive time and are outdoors. The final location of the work site and actual leave time will be confirmed 2 days prior to work. Transportation is provided by Fun Services (though I may opt to take my child directly to the work site). My child will bring food and beverage and wear the proper attire as requested. The return time is estimated and may vary. Fun Services is not responsible for my child after return to the warehouse. "An employee may be dismissed without prior notice, for just cause, including theft, dishonesty, insubordination, failure to report to work, gross negligence, use of profanity, sexism or other conduct unbecoming of an employee." I give permission to have my child treated at a local hospital in the event of an accident or should my child become ill. If my child has any chronic medical problems (such as asthma, epilepsy, allergies, diabetes, etc.) we understand that the employer is not responsible for any of the medications or any emergencies the child may encounter but the "employee" knows fully what to do in an emergency related to their medical condition. **Emergency Contact:** Relationship Phone Number Phone Number Relationship Any other information we should know about your child that would be helpful to make this a good work experience: Medical Insurance information (in case of non-work related illness): Name of Insurance Provider:_____ Policy Number:_____ Policy Holder's Name:_____ (Parent or Guardian)