

Rosie's Garage 2022-2023

# **Employment Application**

First Name	Mi	iddle	Last Name	
Street Address				
City	State	_Zip code	_Home/Cell Phone	
Email				
Male / Female (Circle One)		S M L XL	Date of Birth:	
Physical limitations (Be specific; if none, w	vrite none)			
Your availability:				
Hours per week (Specify)		Preferi	Preferred days	

## **VOLUNTEER/EMPLOYMENT EXPERIENCE**

In lieu of completing this section, I have submitted a resume, which shall be attached to this application.

## IN CASE OF EMERGENCY, PLEASE NOTIFY

1) Name	_ Relationship
Phone	
2) Name	Relationship
Phone	
and proof of automobile insurance. Are you a one? Yes No As an employee, I agree to provide a v insurance. I agree to mail or deliver co	es driving, Rosie's Garage requires a valid driver's license ble to use your automobile if the employee position requires valid driver's license number and proof of automobile opies of these documents to Rosie's Garage to file with this my employer if my driver's license is restricted,
Insurance carrier	Policy #
Driver's License	State issued
Expiration date	

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_



#### **CRIMINAL HISTORY**

Have you ever been convicted of a misdemeanor or felony, or are any misdemeanor or felony charges pending against you? Yes No

If yes, please explain below. Note, answering yes will not automatically prohibit individuals from becoming employed, but will be considered with respect to time, circumstances, seriousness and relationships to employment responsibilities. Some employment positions may require a background check. If you are selected for one of those assignments, you will be provided with a separate criminal background check authorization form.

My signature below certifies that all statements made on this application are true, complete and correct to the best of my knowledge and belief. I understand these statements are subject to verification. I understand that falsification on this application can disqualify me from consideration or result in my employment being denied. Furthermore, my signature below provides my authorization to the nonprofit to conduct a driver license and motor vehicle record checks as needed, as well as reference checks to determine my suitability for placement.

I hereby release all parties from any liability for furnishing this information.

Signature of Applicant

Date

#### Parent/Guardian signature needed if applicant is under 18 years of age

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

#### ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I, \_\_\_\_\_, HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ALL ACTIVITIES ASSOCIATED WITH ROSIE'S GARAGE, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in activities at Rosie's Garage, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in activities at Rosie's Garage.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activities in which I may participate, and that it will govern my actions and responsibilities at said activities.

In consideration of my application and permitting me to participate in activities, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from the sites, activities, events, volunteer/intern/employment, and field



trips, ROSIE'S GARAGE and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in ROSIE'S GARAGE and/or their directors, officers, employees, volunteers, representatives, agents, the activity holders, and sponsors, whether caused by the negligence of release or otherwise. I acknowledge that they are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that participation in Rosie's Garage may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, mentors, and/or producers of Rosie's Garage or it's activities, events, or employment of any form. These risks are not only inherent to participants, but are also present for staff, volunteers, or interns.

I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident, and/or illness during my time at Rosie's Garage or its related activities, events, and employment, internship, or volunteerism.

I understand while participating in Rosie's Garage, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

I understand that should my behavior, deportment, services, outcomes, or performance not be satisfactory to Rosie's Garage and/or their directors, officers, and management, I can be dismissed and my contract revoked without explanation or pay. I understand that I am responsible for my own actions and behavior and promise to maintain regular consistency in my schedule as defined by Rosie's Garage. Should I violate any rules of conduct, work, volunteer, or intern hours and schedule I understand Rosie's Garage and/or their directors, officers, and management may terminate my services without pay, reference, or explanation.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

### Applicant's Signature \_\_\_\_\_

Applicant's Name

Date

Parent/Guardian Signature

Date

(ONLY NECESSARY if applicant is under 18 years old)