



APPLICATION FOR EMPLOYMENT

Today's Date: _____

General Information

Name: _____
(Last) (First) (Middle)

Mailing Address: _____
(Box or Street) (City) (State) (Zip)

Phone Number: _____ Social Security #: _____

Circle area you would like to work: **Maintenance** **Admissions** **Event Staff** **Other:** _____

Date available to start: _____

Have you ever been employed by the California Mid-State Fair? Yes _____ No _____.

If yes, what department(s): _____.

Are you related to anyone currently employed by the California Mid-State Fair? Yes _____ No _____.

If yes, to whom: _____.

Are you legally eligible to work in the State of California? Yes _____ No _____.

Are you over the age of 18? Yes _____ No _____.

If under 18, can you, after employment, submit a work permit? Yes _____ No _____.

Employment History

Please begin with your most recent employer and account for complete employment records. Please attach supplementary documents if you have had more than three positions.

1-Company Name: _____ Address: _____

From: _____ To: _____ Supervisor: _____ Salary: _____

Describe Duties: _____

Reason for Leaving: _____

2-Company Name: _____ Address: _____

From: _____ To: _____ Supervisor: _____ Salary: _____

Describe Duties: _____

Reason for Leaving: _____

3-Company Name: _____ Address: _____

From: _____ To: _____ Supervisor: _____ Salary: _____

Describe Duties: _____

Reason for Leaving: _____

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Education	
Institute	Degree/Highest Grade Completed
High School: _____	_____
College/Trade: _____	_____
Are you currently a student? Yes _____ No _____ If yes, full or part-time? Full _____ Part-Time _____	
If yes, name of school currently attending: _____.	

Personal Information
Do you have any physical or mental conditions that may limit your ability to perform the kind of work for which you are applying? Yes _____ No _____. If yes, please describe specific job-related limitations: _____.

References				
Give names, addresses and phone numbers of three persons as employment references. Students are requested to include two professors or teachers under whom they studied.				
Name	Address	Phone	Occupation/Company	Years Known

Conditions of Employment
<p>The California Mid-State Fair is an Equal Opportunity Employer and appointments are based on merit, without regard to race, religion, color, gender, ancestry, place of origin, marital status or disability. I acknowledge that my employment is a part-time, temporary, position only. I acknowledge that I may be terminated for unsatisfactory performance, or other cause, by the California Mid-State Fair during such period without notice or payment in lieu. I agree to further and promote the interests of the California Mid-State Fair at all times.</p> <p>DECLARATION: I certify that the information in this application is true and complete to the best of my knowledge. I understand and agree that my employment is conditional upon meeting job-related requirements to the California Mid-State Fair's satisfaction, satisfactory references, and that my employment will be subject to the above conditions of employment. Any false statements contained herein will disqualify me from employment or result in immediate dismissal for just cause.</p>
<p>Signature of Applicant _____ Date _____</p>

RETURN APPLICATION VIA EMAIL: mail@midstatefair.com or FAX 805-238-5308
 California Mid-State Fair – PO Box 8, Paso Robles, CA 93447 Phone – (805) 239-0655 Fax – (805) 238-5308