



## Application for Employment

**We consider applicants for employment fairly and without regard to race, color, sex, sexual orientation, religion, national origin, age, disability, veteran status or any other legally protected class.**

Smoking is prohibited in the Indiana Convention Center & Lucas Oil Stadium

**(PLEASE PRINT)**

Position(s) Applied For	Date
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Job Line	<input type="checkbox"/> Walk In
<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address	<i>Number</i>	<i>Street</i>
	<i>City</i>	<i>State</i>
	<i>Zip Code</i>	
Telephone Number(s)		Social Security Number
Email Address:		/ /

If you are under 18 years of age, can you provide required proof of eligibility to work?     Yes     No

Have you ever filed an application with us before?     Yes     No    If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?     Yes     No    If Yes, give date \_\_\_\_\_

Do you have relatives currently employed at the Indiana Convention Center & Lucas Oil Stadium?     Yes     No

If yes, list employee(s) and your relationship to each: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? *Proof of citizenship or immigration status will be required upon employment.*     Yes     No

On what date are you available for work? \_\_\_\_\_

Are you available to work:     Full Time     Part Time     Night Shift

Are you currently on "lay-off" status and subject to recall?     Yes     No

# Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

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List professional, trade, business or civic activities and offices held.

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.*

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# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

May we contact your present employer?     Yes     No

Employer	Date Employed		Work Performed
	From	To	
Address			
	Hourly Rate/Salary		
	Starting	Final	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			

Employer	Date Employed		Work Performed
	From	To	
Address			
	Hourly Rate/Salary		
	Starting	Final	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			

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	Starting	Final	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			

# Additional Information

## Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

## Specialized Skills

Check Skills/Equipment Operated:

<input type="checkbox"/> PC	<input type="checkbox"/> Forklift	Other (List)
<input type="checkbox"/> Fax	<input type="checkbox"/> Vacuum	_____
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Blower	_____
<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Heavy Lifting	_____
<input type="checkbox"/> Windows	<input type="checkbox"/> Use of hand tools	_____

State any additional information you feel may be helpful to us in considering your application.

## BUSINESS REFERENCES

1. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
NAME PHONE #  
\_\_\_\_\_  
ADDRESS RELATIONSHIP

2. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
NAME PHONE #  
\_\_\_\_\_  
ADDRESS RELATIONSHIP

3. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
NAME PHONE #  
\_\_\_\_\_  
ADDRESS RELATIONSHIP

## APPLICANT STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to contact my present and former employers and to investigate all the information contained in this application for employment. I hereby release and forever discharge all persons or companies, and their agents and managerial employees, from any and all claims, known or unknown, on account of or arising out of the disclosure and collection of the requested information concerning my employment.

Please be advised that we or an agency contracted by us may obtain a consumer report, criminal background check, educational verification, and/or reference check, about you. The reference check, also referred to as an investigative consumer report, may include information about your character, general reputation, personal characteristics and mode of living, whichever are applicable, that is obtained through personal interviews.

The Fair Credit Reporting Act provides you with the right to request, in writing within a reasonable amount of time, a disclosure of the nature and the scope of the investigation requested. The disclosure shall be made in writing and mailed, or otherwise delivered, to you no later than 5 days after the date on which your request is received-or 5 days after the date on which the report was first requested, whichever is later. You may also request a written summary of your consumer rights under the Fair Credit Reporting Act as prepared by the Federal Trade Commission. These can be obtained at no charge.

To obtain a disclosure of the nature and the scope of the investigation, please provide us a written request. To obtain a written summary of your consumer rights, please simply let us know that you would like a copy.

This application for employment shall be considered active for a period of time not to exceed six (6) months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the EMPLOYEE may resign at any time and the EMPLOYER may discharge the EMPLOYEE at any time without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event you are terminated from employment with the Indiana Convention Center & Lucas Oil Stadium, for any drug or alcohol related reason, the Indiana Convention Center & Lucas Oil Stadium shall keep that information confidential unless you engage in litigation of any kind against our organization, including administrative proceedings. At that time, the Indiana Convention Center & Lucas Oil Stadium reserves the right to use all of the information necessary to resist any and all such claims.

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I have read and have been provided a copy of this statement.

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Signature of Applicant

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Date

7.2018

# Employment Data Record

Employees are treated during the hiring process and employment without regard to race, color, sex, sexual orientation, gender identity, familial status, religion, national origin, ancestry, age, disability, United States military service veteran status or any other legally protected class.

The purpose of this survey is to comply with certain governmental recordkeeping and reporting laws and regulations. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

**Please note:** Your cooperation is voluntary. Inclusion or exclusion of any data will not affect any employment decision.

\_\_\_\_\_ I do not wish to participate in this survey.

## Voluntary Survey

Name: \_\_\_\_\_

Date of application: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

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Check one of the following: (Ethnic Origin)

\_\_\_\_\_ Hispanic or Latino

\_\_\_\_\_ Caucasian

\_\_\_\_\_ Black and African American (Not Hispanic or Latino)

\_\_\_\_\_ Asian (Not Hispanic or Latino)

\_\_\_\_\_ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)

\_\_\_\_\_ American Indian or Alaska Native

\_\_\_\_\_ Two or More Races (Not Hispanic or Latino)

## APPLICANT COPY

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to contact my present and former employers and to investigate all the information contained in this application for employment. I hereby release and forever discharge all persons or companies, and their agents and managerial employees, from any and all claims, known or unknown, on account of or arising out of the disclosure and collection of the requested information concerning my employment.

Please be advised that we or an agency contracted by us may obtain a consumer report, criminal background check, educational verification, and/or reference check, about you. The reference check, also referred to as an investigative consumer report, may include information about your character, general reputation, personal characteristics and mode of living, whichever are applicable, that is obtained through personal interviews.

The Fair Credit Reporting Act provides you with the right to request, in writing within a reasonable amount of time, a disclosure of the nature and the scope of the investigation requested. The disclosure shall be made in writing and mailed, or otherwise delivered, to you no later than 5 days after the date on which your request is received-or 5 days after the date on which the report was first requested, whichever is later. You may also request a written summary of your consumer rights under the Fair Credit Reporting Act as prepared by the Federal Trade Commission. These can be obtained at no charge.

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**Capital Improvement Board of Managers**  
**dba Indiana Convention Center & Lucas Oil Stadium**  
**100 S. Capitol Avenue**  
**Indianapolis, IN 46225**  
[www.icclos.com/jobs](http://www.icclos.com/jobs)