

Everglades Safari
Gift Shop & Restaurant
26700 SW 8th Street
Miami, FL
Phone: (305) 226-6923



Mailing Address:
Oca Enterprises, Inc.
PO Box 940275
Miami, FL 33194
Fax: (305) 554-5666

Application for Employment

Please answer all questions. Resumes are not a substitute for a completed application. Applicants will be considered without discrimination with regard to race, color, sex, age, religion, national origin, marital status, disability, or veteran's status.

Full Name _____ Date _____

Social Security Number _____ Driver's License # _____

Present Address _____ City, State, Zip _____

Permanent Address _____ City, State, Zip _____

Home Phone # _____ Alternate Phone # _____

Email Address _____ Date of Birth _____

Date you can start _____ Referred By _____

Position Desired _____ Salary Desired _____

Type of employment desired: Full-time Part Time Temporary Seasonal

Have you ever worked for this company? Yes No If yes, when? _____

Are you a citizen of the United States? Yes No

If not, are you legally eligible for employment in the US? Yes No

Have you ever pled "guilty," "no contest," or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Each action/explanation will be considered in relationship to the position which you are applying.

Please list any special skills or qualifications including computer, foreign language skills and work experience which you feel qualify you for the job for which you are applying:

References: Please list persons not related to you, whom you have known for at least 1 year

Name _____	Relationship to Applicant _____
Phone Number _____	Years Known _____
Name _____	Relationship to Applicant _____
Phone Number _____	Years Known _____

Education:

High School _____	# of Years completed _____
Address _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No GPA _____
College/University _____	# of years completed _____
Address _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major _____	GPA _____ Degree _____
Other _____	# of years completed _____
Address _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major _____	GPA _____ Degree _____

Employment History: List beginning with the most recent

Name of Employer _____	Dates of Employment	From: _____ / _____ / _____
Address: _____	Position(s) Held: _____	To: _____ / _____ / _____
Phone: _____	Supervisor: _____	
Responsibilities: _____		
Starting Salary: _____	Ending Salary: _____	
Reason for Leaving: _____		
Name of Employer _____	Dates of Employment	From: _____ / _____ / _____
Address: _____	Position(s) Held: _____	To: _____ / _____ / _____
Phone: _____	Supervisor: _____	
Responsibilities: _____		
Starting Salary: _____	Ending Salary: _____	
Reason for Leaving: _____		
Name of Employer _____	Dates of Employment	From: _____ / _____ / _____
Address: _____	Position(s) Held: _____	To: _____ / _____ / _____
Phone: _____	Supervisor: _____	
Responsibilities: _____		
Starting Salary: _____	Ending Salary: _____	
Reason for Leaving: _____		

I certify that my answers are all true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant _____ Date _____