



If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

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Do you have a driver's license? \_\_\_\_\_ DL Number: \_\_\_\_\_

Do you have a reliable mode of transportation? \_\_\_\_\_ State of Issue: \_\_\_\_\_

**PLEASE LIST TWO REFERENCES**

Name:	Name:
Relation:	Relation:
Telephone:	Telephone:

Please provide a brief background of yourself and your experiences to include number of years and experience associated with soccer as either a player, coach, parent, referee, or other...

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**WORK EXPERIENCE**

*PLEASE LIST YOUR WORK EXPERIENCE BELOW, BEGINNING WITH YOUR MOST RECENT JOB*

*JOB ONE*

Name of Employer: \_\_\_\_\_ Dates: \_\_\_\_\_

Job Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

May we contact? \_\_\_\_\_

*JOB TWO*

Name of Employer: \_\_\_\_\_ Dates: \_\_\_\_\_

Job Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

May we contact? \_\_\_\_\_

*JOB THREE*

Name of Employer: \_\_\_\_\_ Dates: \_\_\_\_\_

Job Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties: \_\_\_\_\_

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May we contact? \_\_\_\_\_

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Lawton Soccer Club, I agree that:

Neither the acceptance of this application nor the subsequent entry type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Club practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Lawton Soccer Club, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship at any time, without specified notice or reason. If employed, I understand that the Club may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that this misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the club permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Club from any liability as a result of such contract.

I further understand that my employment with the Club shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Club is terminable at will for any reason by either party.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Lawton Soccer Club is an equal opportunity employer. We adhere to making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with LSC depends solely on your qualifications.