

Dear Team Member Candidate,

Thank you for your interest in a position with Summit Motorsports Park. Please complete the attached application and return it in person or mail it to:

Summit Motorsports Park Event Operations 1300 State Route 18 Norwalk, OH 44857

At Summit Motorsports Park, we like to keep things simple. We have one goal: Exceptional Guest Service. We work hard every day with that goal in mind. We believe in rewarding outstanding work, promoting from within and building long-term relationships with our team members. Our culture makes all of these things possible. It's fun, supportive, competitive and a *Great Place To Work!*

Whether you're in ticket sales, facility maintenance, management, food & beverage, parking, or on the track crew, you are part of an elite team. Exciting and fast-paced, a career at Summit Motorsports Park means working at an award winning facility and being part of something we think is pretty awesome.

Your application will be reviewed by our management staff. Again, thank you for your interest in joining our team.

Sincerely,

Summit Motorsports Park



EMPLOYMENT APPLICATION

Summit Motorsports Park is an Equal Opportunity Employer. We do not discriminate on the basis of race, color, religion, creed, sex, age, marital status, national origin, disability, sexual orientation, military service, or any other protected status under applicable Federal, State, and Local laws.

Please fill out all of the sections below. An incomplete application will not be considered.

| Date of Application | Which position(s) are you applying for: (part-time) | | | | |
|-------------------------|------------------------------------------------------------------------|---------------------------------------------------|-------------------------------|---------------------|--|
| | 8 | Parking Ticket Sales | □ Track Crew □ Hospitality | □ Merchandise | |
| Date Available if Hired | How did you hear about us? Newspaper Ad If other, what form of media? | Store Poster | □ Facebook | □ Road Sign □ Other | |

PERSONAL INFORMATION

| Name | | Address | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| City | State | Zip | Phone Number (s) | | | |
| Email Address | | | | | | |
| Emergency Contact Name | | Relationship | Phone Number | | | |
| Have you ever applied for a position If yes, please specify job position(s) a | | | | | | |
| Have you ever been employed by Sur If yes, please specify job position(s) a | | | □ Yes □ No | | | |
| Do you have any friends, relatives, or If yes, state name and relationship | r acquaintar | ices working for S | Summit Motorsports Park? 🛛 Yes 🗖 No | | | |
| | | | ler the age of 18, any employment is subject to verification that you are of s Park with a work permit and/or limit your hours to those permitted by law. | | | |
| If hired, are you able to provide proo | f of authoriz | zation to work in t | the United States? Yes No | | | |
| Do you have a valid driver's license? | Do you have a valid driver's license? I Yes No | | | | | |
| Do you have reliable transportation to | Do you have reliable transportation to and from work? | | | | | |
| Have you ever been convicted of a criminal offense (felony or misdemeanor)? \Box Yes \Box No If yes, please state the nature of the crime(s), when and where convicted and disposition of the case. | | | | | | |
| Will you consent to a mandatory controlled substance test? | | | | | | |
| Do you have any condition which would require job accommodations? □ Yes □ No If yes, please describe accommodations required. | | | | | | |

NOTE: It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.

EMPLOYMENT HISTORY

List current or most recent employment first.

| | Employer Name | | Position Held | Dates of Employ From | yment To |
|----------|----------------------------|--|--------------------|-------------------------|-------------|
| sr 1 | Employer Address | | City | State | Zip |
| Employer | Employer Phone Supe | | ervisor Name | | |
| Em] | Work Performed | | Reason for Leaving | | |
| | May we contact? □ Yes □ No | | | | |

| | Employer Name | | Position Held | Dates of Employ From | yment To |
|----------|----------------------------|-------|--------------------|-------------------------|-------------|
| ır 2 | Employer Address | | City | State | Zip |
| Employer | Employer Phone | Super | visor Name | | |
| EmJ | Work Performed | | Reason for Leaving | | |
| | May we contact? □ Yes □ No | | | | |

| | Employer Name | | Position Held | Dates of Employ From | yment To |
|----------|----------------------------|--|--------------------|-------------------------|-------------|
| er 3 | Employer Address | | City | State | Zip |
| Employer | Employer Phone Supe | | ervisor Name | | |
| Em | Work Performed | | Reason for Leaving | | |
| | May we contact? □ Yes □ No | | | | |

Are you bound by any agreement with any current employer? \Box Yes \Box No If yes, please explain.

REFERENCES

List 3 professional references, preferably former Supervisors

| f. 1 | Name | Address | | |
|------|------|---------|-----|-------|
| Rei | City | State | Zip | Phone |

| f. 2 | Name | Address | | |
|------|------|---------|-----|-------|
| Rei | City | State | Zip | Phone |

| f. 3 | Name | Address | | |
|------|------|---------|-----|-------|
| Ref | City | State | Zip | Phone |

EDUCATION

| hool | Name | | Address | | |
|------|----------------|---------------|---------|-----|-------|
| Sc | City | | State | Zip | Phone |
| High | Year Graduated | Degree Earned | | | |

| ege | Name | | Address | | |
|-------|----------------|---------------|---------|-----|-------|
| olleg | City | | State | Zip | Phone |
| Ŭ | Year Graduated | Degree Earned | | | |

| nal | Name | | Address | | |
|-------------------|----------------|---------------|---------|-----|-------|
| cation: School | City | | State | Zip | Phone |
| V00 S | Year Graduated | Degree Earned | | | |

Please list any current professional licenses or certifications that you hold

Please list any academic honors, scholarships, awards, special achievements

Please list any additional experience or skills that you feel qualify you for the position you are applying

MILITARY

| Have you ever served in the United States Armed Forces? If yes, what branch? Specialized Training | |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| Rank when discharged? | How many years did you serve in the military? |
| List special military skills/abilities you acquired that would be an asset to this position | |

IMPORTANT: You must read the following statements. If you have any questions concerning these statements, please ask them before you sign the employment application.

By signing my name below, I certify that all statements made on this application are true, complete and correct to the best of my knowledge and that I understand that any false statements, misrepresentation or omissions may at the discretion of Summit Motorsports Park, result in rejection of this employment application or immediate dismissal from employment.

By signing my name below, I expressly authorize Summit Motorsports Park to contact any of my prior employers or references listed above. I also expressly release all of those prior employers and references and Summit Motorsports Park management from any and all liability arising from their giving or receiving information about me.

In the event of my employment with Summit Motorsports Park, I will comply with all rules, regulations, and policies of Summit Motorsports Park. I understand that nothing in this employment application, in Summit Motorsports Park's policy statement, employee handbooks or other personnel guidelines, or in my communications with any Summit Motorsports Park officer or employee is intended to create an employment contract between Summit Motorsports Park and me. I also understand that Summit Motorsports Park has the right to modify its policies without giving me any notice of changes. I acknowledge that no such promise or guarantee is binding upon Summit Motorsports Park unless it is made in writing and signed by an officer of Summit Motorsports Park. I understand that if any employment relationship is established, I have the right to terminate that employment for any reason or no reason and also that Summit Motorsports Park has the right to terminate that employment at any time for any reason or no reason, with or without notice, with or without cause.

I understand that this application becomes void and will not be considered after sixty (60) days, unless renewed in writing by me. I hereby acknowledge that I have read and understand the preceding statements.

Signature

Date