



HR: 4790 W 16th ST, INDPLS, IN 46222 / FAX: 317-492-5083 / www.indianapolismotorspeedway.com

SEASONAL EMPLOYMENT APPLICATION

Note: This Application is valid for 90 days. If you wish to be considered for employment after this period, a new Application must be completed. In addition, you are responsible for ensuring that all information is accurate through any date of hire. An Equal Opportunity Employer

PERSONAL INFORMATION

Date: _____

(As it appears on your SS Card)

Name: _____ SS#: _____

Present Address:

_____ Street _____ City _____ State _____ Zip _____

Email: _____

Phone No: (____) _____ - _____ Are you 18 years or older? YES: _____ NO: _____

GENERAL EMPLOYMENT QUESTIONS

How Did You Learn About Us? _____ Advertisement _____ Friend _____ Walk-In _____ Website
 _____ Relative _____ Employment Agency _____ Other

Position Applied For: _____ Date You Can Start: _____

Are You Employed Now? YES: _____ NO: _____ If so, may we contact your Present Employer? _____

Have you ever applied to or been employed by this Company or any entity related to Hulman & Company before?

YES: _____ NO: _____ If so, when? _____

If applying for a Safety or Parking position, respond to the following:

An essential function of these positions is to continuously remain in one location or walk continuously for ten (10) to twelve (12) hours. The positions may also require lifting of up to 50 pounds, walking up and down flights of stairs, and working outside. Can you perform all of these essential functions, with or without reasonable accommodation?

YES: _____ NO: _____

FORMER EMPLOYERS Provide complete history, starting with current employer (or most recent employer, if you are not now employed). Use a separate sheet if necessary, and explain any gaps in employment.

1.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			PHONE
2.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			PHONE

QUALIFICATIONS FOR EMPLOYMENT

The Company has a policy of assuring that the work environment is free from harassment and discrimination. Have you ever been accused of sexual or other harassment or employment discrimination? YES: _____ NO: _____

If yes, please explain: _____

Do you understand that it is the Company's policy to ensure that all guests, including those with disabilities, are treated with respect and professionalism at all times? YES: _____ NO: _____

Have you ever been convicted of a crime in any State (including felonies, misdemeanors, guilty pleas, pleas of nolo contendere, and any criminal matters resulting in diversion, but not including convictions that were ordered expunged or sealed by a court or statutorily eradicated or minor traffic offenses)? Note: a DUI or similar conviction is not a "minor traffic offense." YES: _____ NO: _____ If yes, please explain: _____

Note: A prior conviction will not necessarily bar you from employment; however the type of conviction and when it occurred and any other relevant information you submit will be considered.

Do you have permanent work authorization (you might have permanent work authorization as a U.S. Citizen, a Permanent Resident Alien, Refugee or Asylee, or as a Temporary Resident Alien under the Immigration Reform and Control Act)? (If "No," please explain and also note that proof of citizenship or immigration status will be required upon employment.)

YES: _____ NO: _____

APPLICANT CERTIFICATION AND AGREEMENT

I authorize the release of any employment data relevant to my employment with the Indianapolis Motor Speedway ("Company") for the purpose of an employment investigation. I authorize a thorough investigation of my past employment, activities, background, agree to cooperate in such investigations, and I release from all liability or responsibility all persons and entities requesting or supplying such information. This investigation may also include a determination regarding whether I have a criminal record. I agree to submit to drug, alcohol, or other testing that may be required as a condition of employment or continued employment, and I understand that refusal to promptly submit to and cooperate with such testing prior to or during my employment may result in disqualification from consideration for employment or, if hired, termination. I understand that if employed, any misrepresentation or omission on this Application or any other Company record will result in dismissal, regardless of the date of discovery. Neither this Application nor any statement made to me during the hiring process or thereafter shall be considered a contract of employment of any kind. If a contract is intended, I understand that it will be separately entered into in writing and signed by the Company's President. Absent such a contract, I understand that, if hired, my employment will be terminable-at-will, with or without cause or notice, and that I am not being employed for any specified or definite period of time. I understand that neither this Application nor any other document given to me by Company is intended to be a contract, offer, statement or confirmation of guaranteed terms or conditions of employment or continued employment. I understand that any employee handbook or manual does not represent an employment contract if I am hired. The Company may alter, modify, amend, or terminate any of its policies and benefits, both as to active and retired employees. The information provided in this Application is true, correct, and complete in all respects.

I understand that this Application remains current for only 90 days. At the conclusion of that time, if I have not been hired by the Company and still wish to be considered for employment, it will be necessary to reapply and fill out a new Application. In addition, I understand that it is my obligation to update this Application in order to ensure that all information is complete and accurate before any hiring decision is made by the Company.

In consideration of the Company's review of this Application, I hereby agree that: (a) any claim, action or lawsuit against the Company, its employees, or agents ("Company Group") arising out of or relating to the hiring process, my employment, or termination of employment, including, but not limited to, any claim or action for employment discrimination or arising under any Local, State, or Federal civil rights law, must be filed in a court of competent jurisdiction or with any state or federal agency having jurisdiction over such matter within 180 calendar days of the event giving rise to the claim or be forever barred, and I knowingly and voluntarily waive any statute of limitations or other period to the contrary; and (b) I knowingly and voluntarily waive any right that I may have to a jury trial in connection with any claim or action for employment discrimination or arising under any Local, State, or Federal civil rights law against Company Group relating to the hiring process, my employment, or the termination of that employment, including, without limitation, any claim or action relating to employment discrimination. This means that any such claim or action will be heard by and tried before a judge. I am unequivocally waiving each of the above-described rights knowingly and voluntarily.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT CERTIFICATION AND AGREEMENT.

I certify that I have read, fully understand, and agree to the foregoing Applicant Certification and Agreement. I have had a sufficient opportunity to ask any questions about the above, and I have signed below voluntarily.

Signature of Applicant: _____ Date: ____/____/____

INDIANAPOLIS MOTOR SPEEDWAY

Employee Data Form

Name: _____

EMERGENCY CONTACTS:

Name: _____

Relationship: D=Daughter F=Father H=Husband M=Mother N=Not related
O=Other S=Son W=Wife

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Phone #: _____

Name: _____

Relationship: D=Daughter F=Father H=Husband M=Mother N=Not related
O=Other S=Son W=Wife

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Phone #: _____

EEOC INFORMATION:

Birth Date: _____

Marital Status: M or S

Sex: M or F

Race: Please Circle One

White

Native Hawaiian or Other Pacific Islander

Hispanic or Latino

Two or More Races

Black or African-American

American Indian or Alaska Native

Asian

**Notice, Authorization, and Release Regarding Consumer Report
And Investigative Consumer Report**

Notice To Applicant or Employee: As part of the Hulman & Company (or one of its affiliates or related corporations, collectively referred to herein as "Company") employment screening process, the Company (or its agents) may obtain a consumer report or investigative consumer report with respect to an applicant for employment, an applicant for contractor status, or current employee. This information will be obtained from a consumer reporting agency ("agency"), and will be evaluated with other information obtained during the screening process in connection with any hiring decision or will be used to evaluate continued employment of a current employee. The consumer report will not be used for any other purpose. If an investigative consumer report, as defined by the Fair Credit Reporting Act ("FCRA" or "Act"), is prepared, the applicant/employee may request a written summary of the nature and scope of the report and a written summary of rights under the FCRA.

Intent Not To Hire (or Retain, Promote or Transfer Current Employee): If, after reviewing the consumer report, the Company intends to make a decision not to engage, retain, promote, transfer or to terminate any individual, based in whole or in part on information contained in that report, it shall provide: (1) notice of such intent; (2) a copy of the report it obtained; and (3) a written description of the individual's rights, as prescribed by the Consumer Financial Protection Bureau under section 1681g(c)(3) of the FCRA.

Decision Not To Hire (or Retain, Promote or Transfer Current Employee) Based on the Consumer Report: If the Company then decides not to engage, retain, promote, transfer or to terminate any individual, based in whole or in part on information contained in the consumer report, then it shall: (1) provide notice of such action to the individual; (2) provide to the individual the name, address, and telephone number of the agency that prepared the report; (3) provide to the individual notice of his/her right to request and obtain, pursuant to section 1681 of the Act, a free copy of the report from the agency and to make a request for such report within 60 days of his/her receipt of notice from the Company informing him/her of its decision not to hire or engage or continue to employ him/her, and additional notice that the individual may dispute with the agency the accuracy or completeness of any information in his/her consumer report, pursuant to section 1681i of the Act.

Applicant/Employee's Authorization and Release: The undersigned applicant for employment or contractor status with or current employee of the Company has read and understands the above and his/her rights in connection therewith. The undersigned hereby authorizes the Company or its agents or assigns to obtain a consumer report and/or an investigative consumer report from a consumer reporting agency regarding him/her. The undersigned hereby releases the Company, its agents, assigns and employees from any liability in connection with their use of the report or their reliance thereon in connection with any decision made by them.

The undersigned understands that the investigative background inquiries to be made may include consumer, criminal, driving, military, employment and other records. These records may include information as to the undersigned's character, work habits, performance, and experience along with reasons for termination of past employment and engagements. The undersigned understands that this report may also include information obtained from various government agencies that maintain records relating to driving, credit, criminal, civil, and other experiences as well as claims involving the undersigned in the files of insurance companies. The undersigned authorizes, without reservation, any party or agency contacted by the Company, its agents or assigns, or any third party used by the Company to furnish the above-mentioned information. The undersigned recognizes and affirms that a copy, pdf, or facsimile of this document shall be as valid as the original.

Signature of Applicant or Employee

Date

Print Full Name

Social Security Number

Current Address

City/State/Zip

Date of Birth (Note: DOB is requested in order to obtain accurate retrieval of records and will not be considered for any other purpose.): _____

Driver's License No.: _____ State: _____

Please check one:

I can work this year

I cannot work this year

Please answer:

I am willing to work in another area if I am available more days than needed by my department.

Yes No

****Please fill in your name, address and years of service with IMS on the reverse side.**

Please circle the dates (including weekdays) you are available to work for each event.

I.M.S. Guest Services

REV, Indy GP & 500 - May

S	M	T	W	T	F	S
						7 ^{Rev}
8	9	10	11	12	13	14 ^{Race}
15	16	17	18	19	20	21 ^{Qual}
22 ^{Qual}	23	24	25	26	27 ^{Carb}	28
29 ^{Race}						

SVRA & Bloomington Gold - June

S	M	T	W	T	F	S
	13	14	15	16	17	18
19 ^{Race}	20	21	22	23	24	25
26						

July 4th Special Event - July

S	M	T	W	T	F	S
						2
3	4					

400 - July

S	M	T	W	T	F	S
			20	21	22	23
24 ^{Race}	25					

Mustang Club - August

S	M	T	W	T	F	S
	1	2	3	4	5	

Corporate Challenge / Oct. TBD - Sept./ Oct.

S	M	T	W	T	F	S
						24
25	26	27	28	29	30	1
2						

Years worked for IMS: _____

Name: _____

Address: _____
