

## Employment Application

Use this worksheet to accompany your resume.

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

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Social Security number: \_\_\_\_\_

Person to contact in an emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

### OPTIONAL INFORMATION

Date of birth: \_\_\_\_\_

Marital status: \_\_\_\_\_ Maiden name: \_\_\_\_\_

Driver's License number: \_\_\_\_\_

Job Objective: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Other job interests: \_\_\_\_\_

Days available to work: \_\_\_\_\_

Skier:

Snowboarder:

### Education:

High School: \_\_\_\_\_ Grade Completed: \_\_\_\_\_ Grades: \_\_\_\_\_

Years Attended, From: \_\_\_\_\_ To: \_\_\_\_\_

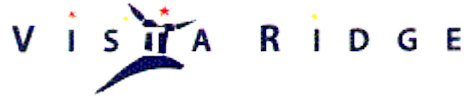
College: \_\_\_\_\_ Degree: \_\_\_\_\_ Year Completed: \_\_\_\_\_

College: \_\_\_\_\_ Degree: \_\_\_\_\_ Year Completed: \_\_\_\_\_

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Honors, achievements, extracurricular activities, hobbies, or interests

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WHIMS:  First Aid:  Specify: \_\_\_\_\_

Food Safe:  ProServe:

Other (including conferences, workshops, seminars):

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Employment Record (In chronological order from most recent):

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Date Employed: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisors Phone: \_\_\_\_\_

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

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Date Employed: \_\_\_\_\_ Date Employment Terminated: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Position: \_\_\_\_\_

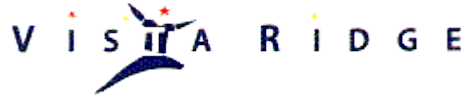
Supervisors Phone: \_\_\_\_\_

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

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Position: \_\_\_\_\_

Company: \_\_\_\_\_

Date Employed: \_\_\_\_\_ Date Employment Terminated: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisors Phone: \_\_\_\_\_

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

### **AUTHORIZATION**

My signature below certifies that:

- All information in this application for employment is correct and complete to the best of my knowledge and belief.
- I understand that false or misleading information in this application could result in refusal of employment or discharge.
- I authorize the verification of the above information and any other necessary inquiries that may be needed to determine my suitability for employment.
- I authorize Sample Company to contact any of the references provided by me for the purpose of a reference check.
- I understand that this application for employment does not constitute an employment offer.

-As the legal parent/guardian of the applicant I give permission for \_\_\_\_\_ to be under the employ of Vista Ridge Recreational Association.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Guardian Signiture (if under 18)

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Name (print)

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