

Evergreen Campsites & Resort

Application for Employment

An Equal Opportunity Employer

Personal Information

Last Name _____ First Name _____ Middle Init. _____

Address _____ City _____ State _____ Zip _____

Social Security No. _____ Are you 18 years or older? YES NO

Home Phone _____ Cell Phone _____

Desired Employment

Position Applying For _____ Current pay _____ Expected Pay _____

Date You Can Start _____ How Many Hours Per Week Can- You Work During the Season _____

Are You Willing To Work Weekends & Holidays? YES NO

Ever Applied Here Before? YES NO Yes, When? _____

Ever Worked Here Before? YES NO Yes, When? _____

Are you currently employed? YES NO Yes, Where? _____

Name of Supervisor _____ Phone No. _____

How Did You Here About This Position? _____

Education

Grammar School _____

High School _____ Graduate? YES NO

College _____ Graduate? YES NO

Military Service _____ Honorable Discharge? YES NO

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Former Employers

List Below last three employers, starting with the MOST RECENT.

Name of Employer _____

Phone No. _____ Start Date _____ Leaving Date _____

Reason for leaving _____

Job Title _____ Supervisor _____

May we contact your supervisor? YES NO

Description of Work _____

Name of Employer _____

Phone No. _____ Start Date _____ Leaving Date _____

Reason for leaving _____

Job Title _____ Supervisor _____

May we contact your supervisor? YES NO

Description of Work _____

Name of Employer _____

Phone No. _____ Start Date _____ Leaving Date _____

Reason for leaving _____

Job Title _____ Supervisor _____

May we contact your supervisor? YES NO

Description of Work _____

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References

Below, Give the names of three persons you are not related to, whom you have known at least one year.

1. Name _____ Phone No. _____ Years Acquainted _____
2. Name _____ Phone No. _____ Years Acquainted _____
3. Name _____ Phone No. _____ Years Acquainted _____

Have you ever been convicted of crime? YES NO Yes, explain _____

AUTHORIZATION

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HERIN AND THE REFERENCES AND EMPLOYERS LISTED TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE EVERGREEN CAMPSITES & RESORT FROM ALL LIABILITY FOR ANY DAMAGE THAT RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF EVERGREEN CAMPSITES & RESORT HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF THE TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED EVERGREEN CAMPSITES & RESORT REPRESENTATIVE.

Signature _____ Date _____

OFFICE USE

Accepted? YES NO If No Why _____

Interviewed By: _____ Date _____ Time _____