SEVEN OAKS

Seven Oaks Recreation Employment Application

Seven Oaks Recreation is an equal-opportunity employer. Employment here is based solely upon an individual's merit and qualifications directly related to the position. We do no discriminate on the basis of race, color, religion, orientation, gender identity, or any other characteristics protected by law.

AVAILABLE POSITION(S) - Please r	mark which position(s) you are interested	d In.	
Summer Seasonal Positions (Minimum A	Age Requirements are in parenthesis):		
River Float Staff (14+)	Paintball Staff (18+)	□ Bus Drivers (18+)	
Events Bartender (18+)	Events Cleaning/Set-up Staff (14+)	Events Busser (16+)	
□ Other			
Winter Season Departments:			
Snow Tube Park Staff (16+)	□ Rope/Handle Tow Operator (16+)	□ Ski/Snowboard Instructor (16+)	
Snowmaker (18+)	Rental Department Staff (16+)	□ Bartender (18+)	
□ Lift Operator (18+)	Parking Attendant (16+)	□ Food/Beverage Staff (14+)	
□ Office/Ticket Sales Staff (18+)	□ Other		
Winter Season Departments: ☐ Posted Position Title			
PERSONAL INFORMATION:			
Name:			
Email Address:			
Address:			
Phone:			
Are you eligible to work in the U.S?	YesNo		
Have you ever been convicted of a fe If yes, please explain:	-	ing yes does NOT auto disqualify you from the hiring process)	
EMPLOYMENT INFO:			
Employment Desired:Ful	I-Time Part-Time	Date you can start	
Are you currently employed?	If so, are you planning to work both jo	bs if hired?	
Are you willing/able to work nights, we	eekends, and holidays?		
REFERRAL SOURCE:			
How did you hear about us?V	Valk InFacebook/Instagram OnlineReferral		
		epartment	
Do you know anyone who works for S	Seven Oaks?YesNo	*If yes, who?	



EDUCATION:

School Name	City/State	Years Attended	Graduate(Y/N)	Degree/Major

PROFESSIONAL REFERENCES:

Name	Relationship	Years Known	Phone Number

EMPLOYMENT HISTORY:

EMPLOYER #1:	JOB TITLE:		DATES EMPLOYED:
ADDRESS:	CITY:	STATE:	ZIP:
PHONE NUMBER:	MANAGERS NAME:	OKAY TO CONTACT?	IF NO, WHY?

EMPLOYER #2:	JOB TITLE:		DATES EMPLOYED:
ADDRESS:	CITY:	STATE:	ZIP:
PHONE NUMBER:	MANAGERS NAME:	OKAY TO CONTACT?	IF NO, WHY?

EMPLOYER #3:	JOB TITLE:		DATES EMPLOYED:
ADDRESS:	CITY:	STATE:	ZIP:
PHONE NUMBER:	MANAGERS NAME:	OKAY TO CONTACT?	IF NO, WHY?

Continue_____

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Do you have other things you'd like to add or for us to know about you?

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Seven Oaks to hire me. If I am hired, I understand that either Seven Oaks or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Seven Oaks has the authority to make any assurance to the contrary. I attest with my signature below that I have given true and complete information on this application. No requested information has been concealed. I authorize Seven Oaks to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature _____

Date _____