



An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, disability or genetic information.

*Please complete all portions of this application. If you are unable to recall specifically any item of information, please indicate.*

### PERSONAL INFORMATION

Name (Last, first) \_\_\_\_\_

Please indicate any other names used in previous employment and/or schooling (for reference purposes only). \_\_\_\_\_

Mailing Address \_\_\_\_\_

City State Zip Code \_\_\_\_\_

Physical Address \_\_\_\_\_

City State Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_

Cell Telephone \_\_\_\_\_

Message Telephone \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_

### DESIRED EMPLOYMENT

Position applying for \_\_\_\_\_

Date you are available to start \_\_\_\_\_

Salary Desired \_\_\_\_\_

Are you employed now? \_\_\_\_\_

If hired, can you provide proof of you legal right to work in the United States?

Yes \_\_\_\_\_ No \_\_\_\_\_

If you are under the age of 18, will you be able, upon employment to submit a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever applied to this company before? Yes \_\_\_\_\_ No \_\_\_\_\_

Where? \_\_\_\_\_ When? \_\_\_\_\_

Have you ever worked for this company before? Yes \_\_\_\_\_ No \_\_\_\_\_

Where? \_\_\_\_\_ When? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

How did you learn about this job?

Newspaper     Company Employee     Walk in     Other \_\_\_\_\_

Referred by: \_\_\_\_\_

Do you require any accommodation to take employment tests or participate in an interview? Yes\_\_\_\_\_ No\_\_\_\_\_ If so, please specify what accommodations you need. \_\_\_\_\_

**US MILITARY SERVICE**

Branch of service\_\_\_\_\_ Final Rank\_\_\_\_\_  
Duties & Special Training \_\_\_\_\_

**MISCELLANEOUS INFORMATION**

Have you been convicted of a misdemeanor in the last 2 years, including serious traffic violations? (Example, driving under the influence, reckless driving, etc.). Any conviction will not necessarily bar you from employment. Yes\_\_\_\_\_ No\_\_\_\_\_

Have you been convicted of a felony? Yes\_\_\_\_\_ No\_\_\_\_\_

Have you been arrested for a crime for which you are currently out of bail or on your own recognizance pending trial? Yes\_\_\_\_\_ No\_\_\_\_\_

**PERSON TO NOTIFY IN CASE OF EMERGENCY**

Name\_\_\_\_\_

Address\_\_\_\_\_

City State Zip Code\_\_\_\_\_

Telephone Number\_\_\_\_\_

Relationship\_\_\_\_\_

**EDUCATION** (Circle highest grade completed)

	School	Major Degree	Address
High School			
1 2 3 4	_____	_____	_____

College			
1 2 3 4	_____	_____	_____

Graduate School \_\_\_\_\_

Trade, Business or Correspondence \_\_\_\_\_

Professional Licenses or Certificates Held \_\_\_\_\_

**GENERAL**

Subjects of Special Study or Research Work\_\_\_\_\_

Special Training\_\_\_\_\_

Special Skills\_\_\_\_\_

## EMPLOYMENT HISTORY

List last three employers, starting with the most recent.  
Account for all time whether employed or not.

May we contact your present employer? Yes\_\_\_\_\_ No\_\_\_\_\_

### 1. Name of Present or Last Employer

\_\_\_\_\_  
Type of Business\_\_\_\_\_

Address\_\_\_\_\_

City State Zip Code\_\_\_\_\_

Telephone Number\_\_\_\_\_

Start Date\_\_\_\_\_ End Date\_\_\_\_\_

Job Title\_\_\_\_\_

Weekly Starting Salary\_\_\_\_\_ Weekly Ending Salary\_\_\_\_\_

May we contact for reference? Yes\_\_\_\_\_ No\_\_\_\_\_

Name of immediate supervisor\_\_\_\_\_ Position\_\_\_\_\_

Description of work\_\_\_\_\_

\_\_\_\_\_

Reason for leaving

Resigned  Laid off  Discharged  Other (explain) \_\_\_\_\_

\_\_\_\_\_

### 2. Name of Present or Last Employer

\_\_\_\_\_  
Type of Business\_\_\_\_\_

Address\_\_\_\_\_

City State Zip Code\_\_\_\_\_

Telephone Number\_\_\_\_\_

Start Date\_\_\_\_\_ End Date\_\_\_\_\_

Job Title\_\_\_\_\_

Weekly Starting Salary\_\_\_\_\_ Weekly Ending Salary\_\_\_\_\_

May we contact for reference? Yes\_\_\_\_\_ No\_\_\_\_\_

Name of immediate supervisor\_\_\_\_\_ Position\_\_\_\_\_

Description of work\_\_\_\_\_

\_\_\_\_\_

Reason for leaving

Resigned  Laid off  Discharged  Other (explain) \_\_\_\_\_

\_\_\_\_\_

### 3. Name of Present or Last Employer

\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
Job Title \_\_\_\_\_  
Weekly Starting Salary \_\_\_\_\_ Weekly Ending Salary \_\_\_\_\_  
May we contact for reference? Yes \_\_\_\_\_ No \_\_\_\_\_  
Name of immediate supervisor \_\_\_\_\_ Position \_\_\_\_\_  
Description of work \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving  
 Resigned  Laid off  Discharged  Other (explain) \_\_\_\_\_  
\_\_\_\_\_

*Please account for other periods of time when not employed.*

Dates \_\_\_\_\_ Activity \_\_\_\_\_  
Dates \_\_\_\_\_ Activity \_\_\_\_\_  
Dates \_\_\_\_\_ Activity \_\_\_\_\_

#### PROFESSIONAL REFERENCES

*List three professional references that are familiar with the quality of your work, have worked directly with you, and that have known you for at least two years.*

1. Reference Name \_\_\_\_\_  
Work Telephone Number \_\_\_\_\_  
Home Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_

2. Reference Name \_\_\_\_\_  
Work Telephone Number \_\_\_\_\_  
Home Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_

3. Reference Name \_\_\_\_\_  
Work Telephone Number \_\_\_\_\_  
Home Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_

## PLEASE READ CAREFULLY AND SIGN

### Background Investigation

I recognize that any misrepresentation or omission of fact on this application may result in my immediate dismissal. I authorize the companies, schools, entities and persons named above and all others for whom I have worked to release any information that they may have about me.

I understand that my employment is subject to background investigation. This investigation may cover employment, education, credit, Department of Motor Vehicles and criminal record checks. I understand that the information obtained from this investigation will be confidential. I further understand that my authorization to allow this investigation will apply to and allow Sierra Recreation Associates Inc. to conduct the background checks and investigation prior to, in conjunction with or after I am hired. This means that Sierra Recreation Associates Inc. will be able to use my authorization to conduct one or more background checks and/or investigation in order to ensure and update periodically my personal history.

### Employment-At-Will-Agreement

Further, I understand that employment at Sierra Recreation Associates Inc. and any of its parent, affiliated or successor companies, is on an "employment-at-will" basis and thus agree that, if I am hired by Sierra Recreation Associates Inc., my employment is for an indefinite period and may be terminated at any time, for any reason, with or without cause, by me or Sierra Recreation Associates Inc. without prior notice. I further understand and agree that, although other terms and conditions of my employment may change, this "employment-at-will" relationship will remain in effect throughout my employment with Sierra Recreation Associates Inc. and any of its parent, affiliated or successor companies, unless it is specifically modified by an express written contract that is signed by the Chief Executive Officer or Sierra Recreation Associates Inc. and me. This at-will employment relationship may not be modified by an oral or implied agreement by any person, statement, act, series, or events or patterns of conduct. I hereby acknowledge that these statements above about the at-will nature of employment constitute the complete understanding between Sierra Recreation Associates Inc. and me regarding this subject.

### Drugs

Sierra Recreation Associates Inc. reserves the right to administer drug tests as a condition of employment. I also understand that possession, use, sale, purchase, or being under the influence of illegal drugs in the job will result in termination of employment.

By submitting this application, I understand and certify that the information is true and correct, whether I submit this Application via email, fax, hand delivered or other written on recorded means.

I certify that all information contained in this application is true and correct. In addition, I agree to all the terms outlined herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date