

APPLICATION FOR EMPLOYMENT AND BACKGROUND CHECK



mt. Holiday
Ski & Recreation Area

Mt. Holiday, Inc. is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin. Mt. Holiday, Inc. is an at will, seasonal employer.

PERSONAL INFORMATION

Today's Date: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

Are you 18 years of age or older: Yes No Do you have reliable transportation: Yes No

If Referred to Mt. Holiday--By Whom: _____

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain _____

EMPLOYMENT DESIRED

Position: _____ Date You Can Start: _____ Wage Desired: _____

Relevant Experience for Position Desired: _____

Are you available to work: Full-time Part-time

Are you currently employed now: Yes No If So Where: _____

Applied/worked at Mt. Holiday before: Yes No Date(s)& Position: _____

AVAILABILITY

Do you plan on any vacations during the winter break? : Yes No

Mt. Holiday's Normal Days and Hours of Ski Operations:

Tuesday-Thursday 4:00pm-8:00pm, Friday 4:00pm-9:00pm, Saturday 10:00am-9:00pm, Sunday 11:00am-5:00pm

Please note: Holiday Hours are 10:00am – 9:00pm

Shifts Generally Begin 1 hour prior to Opening and end 1 hour after Closing (Exceptions Apply)**

Days/Times You Will NOT Be Available: _____

EDUCATION

High School: _____ City/State: _____

Did You Graduate: Yes No

College/Trade School: _____ City/State: _____

Did You Graduate: Yes No

CURRENT & FORMER EMPLOYERS (list starting with the most current employer)

From: _____ To: _____ Employer: _____ Wage: _____

Position/Supervisor: _____ Phone: _____

Reason for Leaving: _____

From: _____ To: _____ Employer: _____ Wage: _____

Position/Supervisor: _____ Phone: _____

Reason for Leaving: _____

PROFESSIONAL REFERENCES (List below three persons not related to you, whom you have known at least one year.)

Name: _____ Contact Phone/Email: _____

Years Acquainted: _____ How do you know them? _____

Name: _____ Contact Phone/Email: _____

Years Acquainted: _____ How do you know them? _____

Name: _____ Contact Phone/Email: _____

Years Acquainted: _____ How do you know them? _____

AUTHORIZATION: I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed no matter when discovered by Mt. Holiday, Inc. I understand I will be required to attest to my identity, employment eligibility, and to present documentation confirming such. I understand that filling out this form does not indicate there is a position open and does not obligate Mt. Holiday, Inc. to hire. If hired, I agree to abide by all of Mt. Holiday's work rules, policies and procedures. Mt. Holiday, Inc. is an at will, seasonal employer and retains the right to revise its policies or procedures, in whole or in part, at any time. I understand this application is in no way an offer of employment.

BACKGROUND/REFERENCE CHECK: I understand that any employment is conditioned on a background check. I authorize Mt. Holiday, Inc. to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to Mt. Holiday, Inc. without giving me prior notice of such disclosure. In addition, I release Mt. Holiday, Inc., any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I agree to a background check: Yes No Signature: _____ Date: _____

If I am offered employment I agree to submit to a medical examination and drug test before starting work, if employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by Mt. Holiday, Inc. and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to Mt. Holiday, Inc. the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by Mt. Holiday, Inc. and its Drug and Alcohol Policy.

Signature: _____ Date: _____

Additional comments: