

Seasonal Employment Application WINTER 2021-2022



WE ARE AN EQUAL OPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

APPLICANT INFORMATION			
Last Name:	First:	M.I.:	Date:
Street Address:	City:	State:	Zip:
Phone:	E-mail:		Are you over 18?
Date Available to start:	You are willing to work: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekends <input type="checkbox"/> Nights <input type="checkbox"/>		
Are you legally authorized to work in the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you available during the off-season? YES or NO (circle one)	
Have you ever applied for employment with our Company? YES <input type="checkbox"/> NO <input type="checkbox"/>		Position/Dates:	
Are you vaccinated against Covid-19? (circle one) YES or NO Do you have a Covid-19 vaccination exemption? (please circle) YES or NO			

Please indicate all positions that you are applying for, in order of preference using 1,2,3.....

Restaurant & Bar	Snow Sports	Mountain Operations
Bartender	Ski Instructor	Lift Operator (chair & tubing) (18+)
Manager	Snowboard Instructor	Snow Grooming (day & night) (18+)
Busser	Race Team	Snowmaking (day & night) (18+)
Cook	Alpine Coach	Tubing Park Attendant (18+)
Hostess	Racing/Event Staff (14+)	Rental
Server	Ski Patrol	Rental technician (18+)
Cafeteria	Paid Patroller (18+ and NSP#)	Tuning technician (18+)
Assistant Manager	Volunteer Patroller	Maintenance
Cook	Front Desk/Guest Services	Mechanic (18+)
Cashier	Ticket seller	Janitorial
Terrain Park	Ticket checker	Manager
Park Crew	Office Assistant (18+)	Staff

EMPLOYMENT HISTORY <i>(List below last three employers, starting with the most recent)</i>			
Present or Last Position:	Company:	From (Mo/Yr.):	To (Mo/Yr.):
Street Address:	City:	State:	Zip:
Duties:		Reason for leaving:	
May we contact your supervisor: YES <input type="checkbox"/> NO <input type="checkbox"/>		Name of Supervisor:	
Title and department of Supervisor:		Phone number of Supervisor:	
Present or Last Position:	Company:	From (Mo/Yr.):	To (Mo/Yr.):
Street Address:	City:	State:	Zip:
Duties:		Reason for leaving:	
May we contact your supervisor? YES <input type="checkbox"/> NO <input type="checkbox"/>		Name of Supervisor:	
Title and department of Supervisor:		Phone number of Supervisor:	

Present or Last Position:		Company:	From (Mo/Yr.):	To (Mo/Yr.):
Street Address:		City	State:	Zip:
Duties:			Reason for leaving:	
May we contact your supervisor? YES NO		Name of Supervisor:		
Title and department of Supervisor:			Phone number of Supervisor:	
EDUCATION INFORMATION				
High School or GED:	City & State:		Degree:	Major:
College:	City & State:		Degree:	Major:
Graduate School:	City & State:		Degree:	Major:
Other:	City & State:		Degree:	Major:
DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS & EXTRACURRICULAR ACTIVITIES.				
ADDITIONAL INFORMATION				
Other qualifications- Summarize special job-related skills and qualifications acquired from employment or other experiences				
Specialized Skills (List skills/ equipment operated/ computer software programs used)				
PROFESSIONAL REFERENCES				
Name	Address	Phone number	Work Relationship	
PLEASE READ THE FOLLOWING STATEMENTS VERY CAREFULLY				
<ul style="list-style-type: none"> In consideration of my employment, I agree to conform to the policies and procedures of the Company. I understand that in submitting this application, the Company is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time. I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or if I am hired, my employment being terminated. I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will, upon request, sign all necessary consent forms. 				
Signature			Date	