

CAMELBACK

MOUNTAIN RESORT

EMPLOYMENT APPLICATION

Date of Application _____

We consider applicants for all positions regardless of race, color, religion, sex, national origin, age, marital or veteran's status, disability, medical condition or handicap, or any other legally protected status.

PERSONAL INFORMATION

Name _____ E-mail address _____

Address _____

City _____ State _____ Zip _____

Phone# (____) _____ Other Phone # (____) _____

Are you at least 18 years old? Yes No

If you are under 18, can you supply working papers? Yes No

Are you a citizen of the United States? Yes No

If not, are you legally eligible for employment in the United States? Yes No

(If offered employment, you will be required to submit employment eligibility verification.)

Have you ever been employed by Camelback Mountain Resort before? Yes No

If yes, when? _____

(Application must be completed in full for every season of employment.)

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please explain. _____

You will not be automatically disqualified for employment because of the existence of a criminal record.

Have you completed the **Pocono Promise**? Yes No

If yes, which organization did you complete it through? _____

Position(s) applied for _____ Date available _____

(Must be completed in order to be considered for employment.)

Rate of pay desired _____

What type of employment are you seeking? *(Please note that most positions require working weekends and holidays.)* Full Time Year-Round Winter Season Summer Season

EDUCATION

	Name and Address of School	Course of Study	Did You Graduate?	Degree or Diploma	# of Years Completed
High School					
College					
Other					

EMPLOYMENT HISTORY

MOST RECENT OR CURRENT EMPLOYMENT

Employer: _____ From: _____ To: _____
 Phone: _____ Position: _____
 Address: _____
 Job Responsibilities: _____

 Supervisor's Name: _____ Salary: _____
 May we contact your present employer? _____

PRIOR EMPLOYMENT

Employer: _____ From: _____ To: _____
 Phone: _____ Position: _____
 Address: _____
 Job Responsibilities: _____

 Supervisor's Name: _____ Salary: _____
 Reason for leaving: _____

PRIOR EMPLOYMENT

Employer: _____ From: _____ To: _____
 Phone: _____ Position: _____
 Address: _____
 Job Responsibilities: _____

 Supervisor's Name: _____ Salary: _____
 Reason for leaving: _____

REFERENCES

Names of people not related to you, that you have known for at least one year.

Name	Address	Telephone	Years Known

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 or intentionally omitted, shall be grounds for termination. I authorize investigation of all my statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Signature: _____ **Date:** _____