



Employment Application

An Equal Opportunity Employer

Personal Information

Last Name _____ First Name _____ Middle Init. _____
Address _____ City _____ State _____ Zip _____
Social Security No. _____ Are you 18 years or older? YES NO
Home Phone _____ Cell Phone _____

Desired Employment

Position Applying For _____ Current Pay _____ Expected Pay _____
Date You Can Start _____ Requested Hours Per Week _____
Are You Willing To Work Weekends & Holidays? YES NO
Are you currently employed? YES NO Yes, Where? _____
Name of Supervisor _____ Phone No. _____
How Did You Here About This Position? _____

Education

High School _____ Graduate? YES NO
College _____ Graduate? YES NO
Military Service _____ Honorable Discharge? YES NO

Former Employers

List your last three employers, starting with the MOST RECENT.

Name of Employer _____
Phone No. _____ Start Date _____ Leaving Date _____
Reason for leaving _____
Job Title _____ Supervisor _____
May we contact your supervisor? YES NO
Description of Work _____

Name of Employer _____
Phone No. _____ Start Date _____ Leaving Date _____
Reason for leaving _____
Job Title _____ Supervisor _____

May we contact your supervisor? YES NO

Description of Work _____

Name of Employer _____

Phone No. _____ Start Date _____ Leaving Date _____

Reason for leaving _____

Job Title _____ Supervisor _____

May we contact your supervisor? YES NO

Description of Work _____

References

Below, give the names of three people you are not related to, whom you have known at least one year.

- | | | |
|---------------|-----------------|------------------------|
| 1. Name _____ | Phone No. _____ | Years Acquainted _____ |
| 2. Name _____ | Phone No. _____ | Years Acquainted _____ |
| 3. Name _____ | Phone No. _____ | Years Acquainted _____ |

Have you ever been convicted of crime? YES NO

Yes, explain

Authorization

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 SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HERIN AND THE REFERENCES AND EMPLOYERS LISTED TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE GREEN LAKE CAMPGROUND FROM ALL LIABILITY FOR ANY DAMAGE THAT RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF GREEN LAKE CAMPGROUND HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF THE TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED GREEN LAKE CAMPGROUND REPRESENTATIVE.

Signature _____ Date _____