

Application

<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	Wednesday	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>		
Check the boxe	applicants s under the day o	will receive cor	nsideration for e	mployment regardle o work:	ess of allergies.			
	•			nment will not be di	scriminated agains	st. All qualified		
contain or you r		ntact with whe		s, tree nuts, fish, and				
Allergy Disclaim Our outdoor wo		onsists of inter	actions with var	ious plants and inse	cts. The menu iter	ns in our café may		
			☐ I Have no Pre	eference				
			☐ Afternoons C☐ Nights	Only				
Do you prefer to work (Check all that Apply):			☐ Mornings Only☐ Days					
Availability:								
				erations Manager (1	.8 & up)			
			☐ Olson Beach ☐ Outdoor Stor	Team				
			☐ Café Team☐ Beach Renta	l Team				
•	g for (Check all th	_	☐ Camp Store	Геат				
Do you have rel	iable transportati	on to get to wo	ork: 🗆 Yes	□No				
Are you authori	zed to work in the	e US?	□Yes	□No				
Cell Phone Number:			Home Phone Number:					
If under 18, plo	ease list age: Email Address:							
City & State:			Zip Code:					
Street Address	:							



Application

When are you available t	o start work		Application			
When will you need to er				the fall	l?	
Type of School	Name o	f School	Location (City & Sta	ite)	Years Completed	Major/Degree
High School:				,	•	, , ,
College:						
Business or Trade:						
Professional School:						
Work Experience						
Please list your work exp	erience beg	inning with	n your most recent job	held.		
Name of Employer						
Location (City & State)						
Name of Last Supervisor						
Employment Dates		From: To:				
Phone Number of Employer						
Your Last Job Title						
Reason for Leaving						
Name of Employer						
Location (City & State)						
Name of Last Supervisor						
Employment Dates		om:		To:		
Phone Number of Emplo	oyer					
Your Last Job Title						
Reason for Leaving						



Application

Please list two references other than relatives or previous employers.

Name:	
Job Title and Relationship:	
Phone Number:	
Name:	
Job Title and Relationship:	
Phone Number:	
• • • • • • • • • • • • • • • • • • • •	eceive consideration for employment without regard to race, color, religion, sex, sexual national origin, disability, status as a protected veteran, or any other legally protected
·	true and complete to the best of my knowledge. If this application leads to employment, I eading information in my application or interview may result in my release.
Print Name	Signature

Today's Date

Once the application is completed, please click on this <u>link</u> to email the application to Rocktown Adventures at Rock Cut.