



Are you either a U.S. citizen or alien who has the legal right to work and remain in the U.S.? (Proof of Citizenship or immigration status will be required upon employment.) Yes No

Have you ever been convicted of a crime? (Conviction will not necessarily disqualify an applicant from employment.) If yes, please describe fully the criminal conviction(s), listing the nature or the offense, when, where and the outcome. Yes No

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Are you physically able to perform the duties of the job for which you are applying, with or without reasonable accommodation? Yes No

Are you willing to accept our grooming standards and dress code? Yes No

Are you willing to work **all** days, evenings, weekends and holidays as may be required beginning the Memorial Day Weekend up to and including Labor Day Weekend? Yes No

Have you ever filed an application with us before? Yes No

If "yes" give the date \_\_\_\_\_ and position applied for \_\_\_\_\_

Have you ever been employed with us before? Yes No

If "yes" give the date \_\_\_\_\_ and position worked \_\_\_\_\_

Are you currently employed? Yes No

If "yes" may we contact your present employer? Yes No

Are you available to work: FULL TIME Yes No  
PART TIME Yes No

When would you be able to start? \_\_\_\_\_

If part-time, what hours are you available? \_\_\_\_\_

Please indicate any foreign languages you can speak, read and/or write:

|       | Fluent | Conversational | Some Ability |
|-------|--------|----------------|--------------|
| Speak | _____  | _____          | _____        |
| Read  | _____  | _____          | _____        |
| Write | _____  | _____          | _____        |

School Name & Location

Grade Completed

Diploma/Degree

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If in High School, name of guidance counselor. \_\_\_\_\_

If in (or going to) college, give date of return from school. \_\_\_\_\_

**REFERENCES**

**Give name, address and telephone number of three personal references who are **not related to you** and are **not previous employers.****

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

If in high school, guidance counselor will be considered as an additional reference.

**EMPLOYMENT EXPERIENCE**

Start with your present or most recent job.

Employer Name

Dates of Employment

\_\_\_\_\_

To: \_\_\_\_\_

Employer's Address

From: \_\_\_\_\_

\_\_\_\_\_

Your Job Title

Employer's Phone No.

\_\_\_\_\_

\_\_\_\_\_

Work Performed

Your Supervisor's Name

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving:

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Employer Name

\_\_\_\_\_

Employer's Address

\_\_\_\_\_

Employer's Phone No.

\_\_\_\_\_

Your Supervisor's Name

\_\_\_\_\_

Reason for Leaving:

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment

To: \_\_\_\_\_

From: \_\_\_\_\_

Your Job Title

\_\_\_\_\_

Work Performed

\_\_\_\_\_

\_\_\_\_\_

### **SKILLS AND QUALIFICATIONS**

Summarize unique job-related skills and qualifications acquired from employment or other experiences. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I give the company permission to contact any or all of my previous employers and references, and I authorize them to provide all information requested by Howe Caverns, Inc.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand that false or misleading information given in my application or interview(s) may result in my application being rejected.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer, which I understand are subject to change by the company.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_