

**ALPINE VALLEY SKI AREA
APPLICATION FOR POSITION**

The Michigan Employment Security Commission has designated Alpine Valley Ski Area a SEASONAL EMPLOYER.
(Must be 16 years of age or older to apply).

PERSONAL INFORMATION

NAME: _____ SOCIAL SECURITY _____ - _____ - _____

ADDRESS: _____
(STREET) (CITY) (ZIP)

PHONE NUMBER: (_____) _____ - _____ ALT#: (_____) _____ - _____

REFERRED BY: _____ To your knowledge, do you have any relatives working with us? _____

Are you at least 18 years old? Yes _____ No _____ if no, how old are you? _____ (Work Permit is required if under 17. Work permits are available at your school.)

EMPLOYMENT INFORMATION

PLEASE CHECK DESIRED POSITION(S):			
CAFETERIA _____	RENTAL _____	JANITORIAL _____	TICKET OFFICE _____
MUST BE AT LEAST 18 YEARS OLD FOR THE FOLLOWING POSITIONS:			
CHAIRLIFT OPERATOR _____	SECURITY _____	SNOWMAKING _____	BAR/LOUNGE _____

Have you worked for us before? Yes _____ No _____ if yes, what Department? _____

What shifts would you be available for?

MONDAY: AM _____ PM _____ THURSDAY: AM _____ PM _____ SUNDAY: _____
TUESDAY: AM _____ PM _____ FRIDAY: AM _____ PM _____
Wednesday: AM _____ PM _____ SATURDAY: AM _____ PM _____

Are you employed at the present time? Yes _____ No _____ if yes, please complete the information below:

Employer's Name: _____ Supervisor's Name: _____

Your Job Title: _____ Address: _____ Phone #: _____

Duties and Responsibilities: _____

1. How long have you been with this employer? _____ Present salary: _____
2. If offered a position, when can you report for work _____
3. If hired can you show proof of your legal right to work in the U.S.? Yes _____ No _____
4. Have you ever been dismissed, or asked to resign from any position? Yes _____ No _____
If "Yes", please explain: _____

PERIODS OF EMPLOYMENT

- 1. Name of Last Employer: _____ Your Job Title: _____
Address: _____ Supervisor's Name: _____
Phone No.: _____ From: ____/____/____ TO ____/____/____
Duties and Responsibilities: _____
Reason for leaving: _____

- 2. Name of next Employer: _____ Your Job Title: _____
Address: _____ Supervisor's Name: _____
Phone No.: _____ From: ____/____/____ TO ____/____/____
Duties and Responsibilities: _____
Reason for leaving: _____

EDUCATION

Please list on the following lines all schools attended and/or specialized training, licenses and/or experience you have and any other pertinent information about your background:

School (s) _____ Subjects studied (if applicable)

High School

College (Including dates attended)

REFERENCES

- 1. Name: _____ Relationship: _____ Phone #: _____
- 2. Name: _____ Relationship: _____ Phone #: _____
- 3. Name: _____ Relationship: _____ Phone #: _____

Certification

I certify that all of the information furnished on this Application is true, complete and correct. I understand and agree that any falsification, misrepresentation or omission of fact either on this Application or during the pre-hire process will be reason for (1) my not being offered employment or (2) dismissal at any time from the service of Alpine Valley Ski Area, if employed.

I authorize all my former employers and references to give any information they may have regarding me whether or not it is on their records. I hereby release such companies and persons (and their agents individually) from any liability whatsoever resulting from the release of such information. I hereby waive my right to written notice by my present and/or former employers whenever a disciplinary report, letter or reprimand, or other disciplinary action regarding me divulged to you by present or former employers.

If I am employed, I agree to conform to the policies and procedures of Alpine Valley Ski Area. I understand and agree that my employment and compensation is for no definite period and may, regardless of the time and manner of payment of my wages and salary, be terminated at any time by me or Alpine Valley Ski Area with or without cause, and without any previous notice. I also understand and agree that Alpine Valley Ski Area has the right to unilaterally modify and/or terminate any policies, practices, procedures and standards it has adopted or implemented, to the extent not limited by law. I acknowledge that no Alpine Valley Ski Area employee or representative has the power or authority to enter into any agreement for employment for any specified period time, or to make any representations or agreements contrary to at-will employment, unless that agreement is in writing and signed by the Alpine Valley Ski Area CEO. I understand that any prior representations, promises, contracts or statements made by or on behalf of Alpine Valley Ski Area are expressly superseded by this paragraph as confirmed my signature below.

I have read the foregoing provisions and agree to be bound by them.

Signature: _____ Date: _____