Timberline Campground

Job ApplicationPlease read carefully and fill out all the requested information accurately and honestly in legible print.

Personal Information	
ull Name	Date
Address	City State Zip
	Email
Phone #	Email
Date of Birth	Social Security No.
f 16 or younger, can you provide a work permit? Yes No	How did you hear about this job opening?
Are you a U.S. citizen? Yes No	Have you worked for us before? Yes No If yes, when?
Have you ever been convicted of a felony? Yes No	If yes, explain:
In consideration for employment, do you consent to a	In consideration for employment, do you consent to a
background check? Yes No	drug test? Yes No
Position Applied For:	Available Start Date
Availability: Full Time Part Time	
Sunday Monday Tuesday W	Yednesday Thursday Friday Saturda
Education	
High School	Address
Did you graduate? Yes No	
	Address
College	
Did you graduate? Yes No	Address
Did you graduate? Yes No If yes, in what degree?	Address

Employment History	
Employment History	Start to End Date
Employer (1)	Start to End Date
Address	
Supervisor Name	
Phone #	Email
Job Title/Responsibilities	Reason for leaving:
Employer (2)	Start to End Date
Address	
Supervisor Name	
Phone #	Email
Job Title/Responsibilities	Reason for leaving:
Employer (3)	Start to End Date
Address	
Supervisor Name	
Phone #	Email
Job Title/Responsibilities	Reason for leaving:
References	
Name (1)	Relationship
Phone #	Email
Name (2)	Relationship
Phone #	Email
Name (3)	Relationship
Phone #	Email
Leastify that the information contained in this applicat	tion is correct to the best of my knowledge. I understand that to falsify information is
and for refusing to hire me, or for discharge shoul	ld I be hired. I authorize any person or organization listed on this application to furnish you
any and all information concerning my previous emplo	oyment, education and qualifications for employment. I also authorize you to re-quest and ployment, I agree to abide by the rules and regulations of the company, which rules may
receive such information. In consideration for my emp	time, at the company's sole option and without prior notice to me. I also acknowledge that
be changed, withdrawn, added or interpreted at any t	cceptance of employment with-drawn, at any time, with or without cause, and with or
without prior notice at the option of the company or i	myself.
Applicant's Signature	Date
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