

# Storybook Island Employment Application



Full Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

First Middle I Last Circle one Cell Residence Work

Address: \_\_\_\_\_

Street City State Zip

Are you legally entitled to work in the United States? [ ] Yes [ ] No

Are you 18 years old or older? [ ] Yes [ ] No If not, please give your date of birth: \_\_\_\_\_

If hired, when can you start? \_\_\_\_\_ Planned Time Off: \_\_\_\_\_

Summer Season: May 23 – September 7th: Do you plan on working the entire Season? If not, Planned end date of employment \_\_\_\_\_

T-Shirt Size: Medium Large X-Large 2X. – Circle One

## EDUCATION

### High School

Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

Number of years attended: \_\_\_\_\_ Did you graduate? [ ] Yes [ ] No Date of graduation: \_\_\_\_\_

### College and or Trade School

Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

Number of years attended: \_\_\_\_\_ Did you graduate? [ ] Yes [ ] No Date of graduation: \_\_\_\_\_

## EMPLOYMENT HISTORY

Beginning with your most recent employment and working back in time, please give the following information:

### Employer 1

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

### Employer 2

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

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**PERSONAL REFERENCES**

Please provide the names of **two references that have not employed you and are not related to you.**

**Reference 1**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Reference 2**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

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**ADDITIONAL QUALIFICATIONS**

Please tell us about any other training, education, skills, or achievements that you feel should be considered:

\_\_\_\_\_  
\_\_\_\_\_

.....

My answers are true and complete. I understand if I am hired, any false or incomplete statements in this application will be grounds for immediate discharge.

Applicant's Name: \_\_\_\_\_

Please print

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**As a Parent I will Partner with Storybook Island to encourage my child to be on time, work the schedule given and be ready to work the summer.**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please include a copy of your resume with this application if you are applying for a full-time position. Thank you.**

Send this application to  
**Storybook Island**  
P.O. Box 9196 Rapid City, SD 57709 605-342-6357