

EMPLOYMENT APPLICATION

Please complete the entire application. Failure to do so will result in not being considered for employment. Once completed, you may email it to us at info@rainbowraces.org .

Thank you for your interest in employment with us!

1. Employer Information

Employer: Rainbow Races Inc.

City/State/ZIP: Chicago, Illinois 60649

It is the policy of Rainbow Races Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender or gender expression, orientation, national origin, age, disability, or veteran status.

2. Applicant Information

Applicant Full Name: _____

Home Address: _____

City/State/ZIP: _____

Number of years at this address: _____

Daytime phone: _____ Evening phone: _____

Mobile phone: _____

Driver's License (State/Number): _____

3. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: _____

Relationship to you: _____

Address: _____

City/State/ZIP: _____

Daytime phone: _____ Evening phone: _____

4. Job Position Applied For: Sailing Instructor

5. Salary Desired: \$ _____ per _____

6. Who referred you to our company? _____

Do you have any friends or relatives who work here? If yes, please list here:

7. Are you at least 18 years old? _____ Yes _____ No

8. Are you willing to work any shift, including evenings and weekends? _____ Yes
_____ No

If no, please state any limitations:

9. If applicable, are you available to work overtime? _____ Yes _____ No

10. If you are offered employment, when would you be available to begin work?

11. If hired, are you able to submit proof that you are legally eligible for

employment in the United States? _____ Yes _____ No

12. Are you able to perform the essential functions of the job position you seek with

or without reasonable accommodation? _____ Yes _____ No

What reasonable accommodation, if any, would you request?

13. Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

or

Skill	Years of Experience	Ability
<input type="checkbox"/> US Sailing Certifications	_____	1 2 3 4 5
<input type="checkbox"/> Additional Courses Taken	_____	1 2 3 4 5
<input type="checkbox"/> Years Sailing	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

14. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

15. Applicant's Education and Training

College/University Name and Address

Did you receive a degree? _____ Yes _____ No If yes, degree(s) received:

High School/GED Name and Address

Did you receive a degree? _____ Yes _____ No

Other Training (graduate, technical, vocational):

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements:

Military Service:

_____ Yes _____ No

Branch: _____

Specialized Training: _____

16. References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

17. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

18. What are your preferred pronouns?

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Rainbow Races Inc. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its President, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Rainbow Races Inc., except in a specific written contract of employment signed on behalf of the organization by its President, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE