# Dimondale Canoe and Kayak Van Driver Application

Responsible for the handling and care of canoes, kayaks, and other boats, driving 15-passenger vans with trailers, transporting customers and boats on river trips, assisting customers with boat rentals, and performing various assigned maintenance and repair tasks. May exert up to 70 lbs of force occasionally, and/or up to 50 lbs of force frequently, and/or up to 20 lbs of force constantly to move objects.

Starting Hourly Rate: \$15.00

Work Schedule: Season is April to October. Regular weekend and holiday work is required. Actual number of hours worked per week is contingent upon weather conditions and time of year.

Upon interview the manager will provide details on how to obtain Michigan Chauffeur License and MDOT Medical Card required by start of employment.

## Experience

### Required

Minimum age requirement of 18 years. Good communication and customer service skills. Ability to perform heavy manual labor and follow oral and written instructions without close supervision. Must have a valid Driver's License.

### Preferred

Past experience in customer service and outdoor recreation.

#### Dimondale Canoe and Kayak

9995 Billwood Hwy, Dimondale, MI 48821 Office Phone Number: 517-235-7091 Matt Jankoviak's Cell Number: 517-290-2088

— Dimondale —

CANOE & KAYAK

		Employn	nent App	olicatio	n				
	Applicant Information								
Full Name:	Last		Fir		Date:				
Address:									
	Street A	Address						Apartment/Unit #	
	City						State	ZIP Code	
Phone:				E	mail				
Date Availa	able:	So	cial Securit	ty No.:			Desired	d Salary: <u>\$</u>	
Position Ap for:	plied	Dock worker Both/No prefere		r (need to	be at le	east 18	3 years of age	, valid driver's license 🗌	
Are you a c	citizen c	of the United State	YES es?	NO □	lf n	o, are <u>y</u>	you authorize	d to work in the YES NO U.S.? □ □	
		please list your (s) name and pho	one						
Have you e felony?	ever bee	en convicted of a	YES						
lf yes, expla	ain:								
				Educa	ation				
High Schoo	ol:			Address:					
From:		To:	_ Did you g	raduate?	YES	NO □	Diploma:		
College:				Address:					
From:		To:	_ Did you g	raduate?	YES	NO □	Degree:		
Other:				Address:					
From:		To:			YES	NO □	Degree:		

	Re	eferences		
Please list thre	e professional references.			
Full Name:				Relationship:
				Phone:
Addrogo				
Full Name:				Relationship:
				Phone:
				Relationship:
				Phone:
A shaha a a s				
		s Employm		
Company:				_ Phone:
				- ·
Job Title:	Startir	ng Salary: <b>\$</b>		Ending Salary: <b>\$</b>
Responsibilities	:			
From:	То:	Reason for Leaving:		:
May we contact reference?	your previous supervisor for a	YES		
Company:				Phone:
Address:				Supervisor:
Job Title:	Startir	ng Salary: <u>\$</u>		Ending Salary: <u>\$</u>
Responsibilities	:			
	То:			<u>.</u>
May we contact reference?	your previous supervisor for a	YES	NO □	
Company:				Phone:

Address:	Supervisor:	
Job Title:	Starting Salary: <u>\$</u> Ending Salary: <u>\$</u>	
Responsibilities:		
From: To:	Reason for Leaving:	
May we contact your previous supervisor for a reference?	a YES NO	
	General Questions	
Are you able to work holidays? (i.e. 4 <sup>th</sup> of July	/, Labor day) Yes 🗌 No 🗌	
Are you CPR certified? Yes 🗌 No 🗌		
Do you have planned vacations between Apri September that we should be aware of? If yes provide dates if possible.		
Disc	laimer and Signature	
I certify that my answers are true and comp		
	nderstand that false or misleading information in my app	lication

or interview may result in my release.

\_\_\_\_\_

Date:\_\_\_\_\_