



SNOW SCHOOL EMPLOYMENT APPLICATION

PERSONAL INFORMATION:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Age, if under 18: \_\_\_\_\_ If under 18 you must furnish work permit if hired

Are you currently attending College \_\_\_\_\_ If yes, are you available only during College Breaks \_\_\_\_\_

Have you ever been convicted of a felony, or a misdemeanor involving any violent act, use or possession of a weapon or act of dishonesty for which the record has not been sealed or expunged? Yes\_\_\_ No\_\_\_

If yes, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case. This company will not deny employment to any applicant solely because the person has been convicted of a crime. The company however, may consider the nature, date and circumstances of the offense as well as whether the offense is relevant to the duties of the position for which you have applied.

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

EMERGENCY INFORMATION:

Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

WOULD LIKE TO TEACH: (Circle ALL that apply)

SKI SNOWBOARD PRE-RACE FUTURE STARS FREESTYLE CAMPS

PSIA/AASI level, if any \_\_\_\_\_ Certification # \_\_\_\_\_

Other teaching experience, if any Where: \_\_\_\_\_ Number of Seasons: \_\_\_\_\_

Jacket Size (circle) XXS XS Small Medium Large XL XXL

If you are a RETURNING INSTRUCTOR how many seasons have you taught at Ski Ward? \_\_\_\_\_



**PLEASE CHECK YOUR AVAILABILITY WITHIN THE HOURS SPECIFIED. THIS IS NOT YOUR SCHEDULE BUT EVERY EFFORT WILL BE MADE TO MEET THE HOURS YOU SPECIFIED.**

\*You must work a minimum of 12 hours per week. **You must be 16 years of age or older to work after 7PM.**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
3:00-6:00 ___	3:00-6:00 ___	3:00-6:00 ___	3:00-6:00 ___	3:00-6:00 ___	8:00-1:00 ___	8:00-1:00 ___
4:00-7:00 ___	4:00-7:00 ___	4:00-7:00 ___	4:00-7:00 ___	4:00-7:00 ___	11:00-4:00 ___	11:00 – 4:00 ___
6:00-9:00 ___	6:00-9:00 ___	6:00-9:00 ___	6:00-9:00 ___	6:00-9:00 ___	4:00-7:00 ___	
					6:00-9:00 ___	

**EMPLOYMENT EXPERIENCE**

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

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**REFERENCES:**

In addition to the employer information above, give name, address and telephone number of three references that are not related to you and are not previous employers.

1. \_\_\_\_\_
2. \_\_\_\_\_

Please read **carefully** before signing!

I understand that the information listed on this application will be used in part to determine if I am to be hired by Ski Ward Ski, Inc. and to the best of my knowledge it is true and correct. I understand that any misstatements or omission of material facts in the application will be reason for immediate termination. I hereby authorize Ski Ward to investigate the above information by contacting my previous employers and personal references. I also understand that drug testing may be required by Ski Ward as a condition of employment, and will be required in the event of personal injury while working. I also understand that if I am hired by Ski Ward, reporting to work under the influence of drugs or alcohol will result in immediate termination of employment.

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