

# TYROL BASIN SKI & SNOWBOARD AREA

Employment Application



Date \_\_\_\_\_

<b>APPLICANT INFORMATION</b>			
Last Name	First	M.I.	
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date available to Start: _____			
Hours available:            AM                            PM                            Overnight (snowmaking)            Any			
List any dates off you may need (does not guarantee approval)			
Position Applying For:    Ticket Office/Customer Service    Lift Operator    Instructor (circle one: Skier            Snowboarder    )			
Rentals            Gift Shop            Food Services/Café Bar            Snowmaking/Grooming            Terrain Park			
Mechanic            Janitor            Tubing            Other _____			
Are you a citizen of the United States?    YES            NO    If no, are you authorized to work in the U.S.?    YES            NO			
Have you ever worked for this company?    YES            NO            If so, when?			
Are you 18 years or older?    YES            NO            If no please list date of birth: _____			
Do you require any special accommodation for a disability?    YES            NO			
If yes, please list accommodation needed:			
Apart from absence for religious observance, are you available for full-time work?    YES            NO			
Are you available for overtime?    YES            NO			

<b>EDUCATION</b>		
High School	Address	
From To	Did you graduate? YES            NO	Degree
College	Address	
From To	Did you graduate? YES            NO	Degree
Other	Address	
From To	Did you graduate? YES            NO	Degree

<b>REFERENCES</b>	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

<b>PREVIOUS EMPLOYMENT</b>		
Company	Phone	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO		
Company	Phone	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO		
Company	Phone	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO		

**SKILLS AND QUALIFICATIONS**

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position you are applying.

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**DISCLAIMER AND SIGNATURE**

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature Date