

Fraser Valley Metropolitan Recreation District



P.O. Box 3348 Winter Park, CO 80482-3348
 Ph. 970-726-8968 Fax 970-726-4034
 www.fvmrdrec.org / www.polecreekgolf.com



APPLICATION FOR EMPLOYMENT

(An Equal Opportunity Employer)

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based on non-job-related information.

Applicant is applying for the following position: _____

Today's Date: _____

Please circle other positions you may be interested in filling (if open):

POLE CREEK GOLF CLUB: Starter Golf Cars Turf Maintenance
 Marshal (volunteer) Pro Shop

PARKS & RECREATION: Camp Counselor Parks Maintenance

Type of employment you are seeking: Full-time seasonal Part-time seasonal Temporary

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------|------------|-------------|------------------|
| | | | |
| Last Name | First Name | Middle Name | Telephone Number |
| Present Street Address | City | State | Zip Code |
| Post Office Box | City | State | Zip Code |
| Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| Social Security #: (optional) _____ | | | |
| If hired can you furnish proof you are eligible to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|---------------------|
| Have you ever applied here before? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, when? _____ |
| Are you a previous FVMRD employee? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, when? _____ |
| Have you ever been convicted of any law violation (except minor traffic violation)? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| If yes, give details: _____ | | | |
| <i>(A "yes" answer does not automatically disqualify you from employment, since the nature of the offense, date and the job for which you are applying, is also considered.)</i> | | | |
| Are you now or do you expect to be engaged in any other business or employment? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| If yes, please explain: _____ | | | |

EDUCATION

| | Name and Address of School | No. yrs completed | Diploma/Degree/Certificate obtained: |
|---------------------------------------------------|----------------------------|-------------------|--------------------------------------|
| High School or GED: | _____ _____ _____ | | |
| College or University: Subjects Studied: | _____ _____ _____ | | |
| College or University: Subjects Studied: | _____ _____ _____ | | |
| Vocational or Technical: Subjects Studied: | _____ _____ _____ | | |

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that are related to the job for which you are applying? _____

How many days of work have you missed during the past year? (exclude absences due to disability or FMLA) _____

For driving jobs ONLY: Do you have a valid driver's license? Yes No

Driver's License No: _____ State: _____ Class: _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes No

If yes, give details: _____

List professional, trade, business or civic activities and offices held (exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status):

WORK HISTORY

List names of employers in chronological order with present or last employer, first. Account for all periods of time including military service and unemployment. If self-employed, give firm name and supply business references. **PLEASE DETAIL TERMS OF EMPLOYMENT WITH MONTH AND YEAR**

| | | | | | | | | | |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|----------------|---|-----------------|-----------------|---------------|-----------------|
| Employer: _____ Address: _____ City, St., Zip: _____ Telephone: _____ | Supervisor: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">From: (mo/yr)</td> <td style="width: 25%; text-align: center;">/</td> <td style="width: 25%;">To: (mo/yr)</td> <td style="width: 25%; text-align: center;">/</td> </tr> <tr> <td>Pay: (start)</td> <td>\$ _____ / ____</td> <td>Pay: (end)</td> <td>\$ _____ / ____</td> </tr> </table> Reason for leaving: _____ | From: (mo/yr) | / | To: (mo/yr) | / | Pay: (start) | \$ _____ / ____ | Pay: (end) | \$ _____ / ____ |
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| Pay: (start) | \$ _____ / ____ | Pay: (end) | \$ _____ / ____ | | | | | | |
| Title: Duties: _____ | | | | | | | | | |
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| Title: Duties: _____ | | | | | | | | | |

REFERENCES

Have you worked or attended school under any other names? Yes No

If yes, give names: _____

Are you presently employed: Yes No

If yes, whom do you suggest we contact? _____

Have you ever been fired from a job or asked to resign? Yes No

If yes, please explain:

Give three references (not relatives or former employers)

Name

Address

Phone

| Name | Address | Phone |
|------|---------|-------|
| | | |
| | | |
| | | |

This section applies to applicant seeking employment with FVMRD School Age Programs (Day Camp or After School Program): **PLEASE READ "Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly."**

Please remit to:

Fraser Valley Metropolitan Recreation District

PO Box 3348

Winter Park, CO 80482-3348

For questions or for more information, please call 970-726-8968