



McIntyre Ski Area LLC

WINTER APPLICATION FOR PRE-EMPLOYMENT

Pre-employment Questionnaire; An Equal Opportunity Employer

Please fill out all parts completely and legibly. Failure to complete may limit your employment opportunity.

2017-2018

| | | |
|----------------------------|---|--------------------|
| Check all boxes that apply | <input type="checkbox"/> New Hire <input type="checkbox"/> Re-Hire <input type="checkbox"/> 14 yr old <input type="checkbox"/> 15-17 yr old <input type="checkbox"/> 18 + | Today's Date _____ |
|----------------------------|---|--------------------|

LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

SOCIAL SECURITY NUMBER _____ DOB _____

(DO NOT RETURN THIS APPLICATION WITH OUT THIS INFORMATION)

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ E-MAIL ADDRESS _____

CHECK ALL POSITIONS OF INTEREST AND NUMBER THEM IN ORDER OF PREFERENCE

| INDOOR WORK | OUTDOOR WORK |
|---|--|
| <input type="checkbox"/> Ticket Cashier/Guest Services <input type="checkbox"/> Custodial <input type="checkbox"/> Food Service & Food Cashier <input type="checkbox"/> Rental Shop <input type="checkbox"/> Party/Group Host | <input type="checkbox"/> Lift Attendant <input type="checkbox"/> Maintenance <input type="checkbox"/> Ski Instructor <input type="checkbox"/> Snowboard Instructor <input type="checkbox"/> Tubing Attendant <input type="checkbox"/> Snowmaking |

Have you ever been arrested or convicted of a crime that has not been annulled by the Court? (yes or no) _____
 Are you employed now? ___ If so, may we contact your present employer? ___ Contact name _____
 Have you ever applied to this company before? ___ When? _____ Date you can start _____ Desired pay _____

| EDUCATION | Name and location of School | # of Years attended | Did you Graduate? | Subjects Studied? |
|-----------------------|-----------------------------|---------------------|-------------------|-------------------|
| High School | _____ | _____ | _____ | _____ |
| College | _____ | _____ | _____ | _____ |
| Trade School or Other | _____ | _____ | _____ | _____ |

The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

SKI/SNOWBOARD INSTRUCTOR

(PSIA/AASI MEMBERS ONLY)

PSIA/AASI Member # _____ Level I _____ Level II _____ Level III _____

Ski/Snowboarding Teaching Experience _____ Number of years teaching _____ When? _____
 Where? _____ What skill levels have you taught _____ Employer's Name _____
 May we Contact? _____ Other teaching experience? _____
 I am interested in: Full Time Part-Time Weekends Evenings Available Times _____
 Age preferred Preschool (ages 4-6) After School (ages 6+) Available Days _____
 Adults Skiing or Snowboarding (circle one or both)

NOTE: As a condition of employment you will be required to teach all ski/sb levels. We will train you at our highly recommended teaching clinics. _____ (initial)

PREVIOUS WORK EXPERIENCE: (RETURNING EMPLOYEES EXEMPT FROM THIS SECTION)

In the section below, please describe your experience/work history. Resumes submitted in lieu of a completed application will NOT be accepted. Be sure to list your most experience first. You are encouraged to provide an up-to-date resume to any interview for this position.

FORMER EMPLOYERS (List your last four employers below, starting with the most recent).

| Month and Year | Name and Address of Employer | Salary | Position | Reason for Leaving |
|----------------|------------------------------|--------|----------|--------------------|
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |

REFERENCES: Give the names of three people not related to you, whom you have known at least one year.

| Name | Address | Phone | Business | Years Acquainted |
|------|---------|-------|----------|------------------|
| | | | | |
| | | | | |
| | | | | |

PHYSICAL RECORD: (NEW AND RETURNING EMPLOYEES MUST COMPLETE THIS SECTION)

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes No If yes, what can be done to accommodate your limitation?

(MUST BE FILLED OUT FOR APPLICANTS UNDER THE AGE OF 18)

Parent's or Guardian's Name _____ Phone _____
Address _____
STREET CITY STATE ZIP EMAIL

EMERGENCY CONTACTS- Please list THREE (3) below

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

APPLICANT: PLEASE DATE & SIGN BELOW

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATIONS OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE PERSONAL OR OTHERWISE. AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING THE SAME FOR YOU.
"I UNDERSTAND AND AGREE THAT, THAT IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE.
I HEREBY GRANT TO McINTYRE SKI SCHOOL, Inc. AND ITS LEGAL REPRESENTATIVES AND ASSIGNS, THE IRREVOCABLE AND UNRESTRICTED RIGHT TO USE AND PUBLISH ANY PHOTOGRAPHS OF ME, FOR EDITORIAL, TRADE, ADVERTISING, AND ANY OTHER MEDIUM FOR THE PROMOTION OF McINTYRE SKI SCHOOL, Inc. AND McINTYRE SKI AREA. I RELEASE THE PHOTOGRAPHER AND HIS/HER LEGAL REPRESENTATIVES AND ASSIGNS FROM ALL CLAIMS AND LIABILITY RELATING TO THE SAID PHOTOGRAPHS."

Date _____ Signature _____