

# Rock Snow Park Employment Application



Email to: [info@rocksnowpark.com](mailto:info@rocksnowpark.com)

or

Mail to: 7900B W Crystal Ridge Rd  
Franklin, WI 53132

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

Name: \_\_\_\_\_  
First Middle Initial Last

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (Optional)

E-mail: \_\_\_\_\_ Are you a U.S. Citizen? Y N Sex: M F

Please rank positions applying for 1 thru 3:

- |  |   |
|--|---|
| <input type="checkbox"/> Lift Operator ( <i>Must be 18</i> ) | <input type="checkbox"/> Cafeteria  |
| <input type="checkbox"/> Rental                              | <input type="checkbox"/> Restaurant: Wait Staff ( <i>Must be 18</i> )         |
| <input type="checkbox"/> Ski Instructor                      | <input type="checkbox"/> Restaurant: Bartender ( <i>Must be 21</i> )          |
| <input type="checkbox"/> Snowboard Instructor                | <input type="checkbox"/> Janitorial   |
| <input type="checkbox"/> Ticketing / Pro Shop                | <input type="checkbox"/> General Maintenance                                  |
| <input type="checkbox"/> Snowmaking ( <i>Must be 18</i> )    | <input type="checkbox"/> Management Position ( <b>Please include resume</b> ) |

## PAST EMPLOYMENT:

COMPANY	PHONE	POSITION	PERIOD		RATE OF PAY		REASON FOR LEAVING
			From	To	From	To	

## PERSONAL REFERENCES:

NAME	RELATIONSHIP	PHONE	BEST TIME TO CALL

## EDUCATION:

SCHOOL	CITY	COURSE OF STUDY	# OF YEARS COMPLETED	GRADUATED?	CUMMULATIVE GPA
High School				Y N	
College				Y N	
Other				Y N	

1. Have you worked for The Rock or Crystal Ridge in the past? Y N  
 If so, list your position and briefly describe your role.

2. Please briefly explain why you want to work at The Rock?

3. Do you have any special skills or qualifications for the position(s) you are applying for?

4. Have you been convicted of a crime within the past ten years, excluding traffic violations? \_\_\_\_\_  
 If yes, list convictions:

**AVAILABILITY:**

In the spaces below, write **YES** if you are available to work and **NO** if you are unavailable to work.

**HOLIDAY WEEKS**

	SAT 12/16	SUN 12/17	MON 12/18	TUE 12/19	WED 12/20	THUR 12/21	FRI 12/22	SAT 12/23	SUN 12/24	MON 12/25	TUE 12/26	WED 12/27	THUR 12/28	FRI 12/29	SAT 12/30	SUN 12/31	MON 1/1/18
<b>DAY</b>										CLOSED							
<b>NIGHT</b>									CLOSED	CLOSED							

**REGULAR SEASON**

Please write hours of availability for each day of the week:		Students on College Break List availability in space below:
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Other comments on availability:



I CERTIFY THAT ALL THE INFORMATION ON THIS APPLICATION IS TRUE AND ACCURATE. I UNDERSTAND THAT THIS APPLICATION BECOMES A PART OF MY EMPLOYMENT RECORD, AND THAT ANY FALSE INFORMATION MAY RESULT IN MY IMMEDIATE DISCHARGE.

I AUTHORIZE AN INQUIRY TO BE MADE ON THE INFORMATION CONTAINED IN THIS APPLICATION IF I AM CONSIDERED FOR EMPLOYMENT.

THE EMPLOYERS, PERSONAL REFERENCES, AND EDUCATIONAL INSTITUTIONS NAMED HEREIN ARE AUTHORIZED TO GIVE INFORMATION ABOUT ME. I HEREBY RELEASE THEM FROM ALL LIABILITY FOR ISSUING SUCH INFORMATION.

I UNDERSTAND AND ACKNOWLEDGE THAT IF ANY MISREPRESENTATION OR OMISSION OF MATERIAL FACTS HAS BEEN MADE BY ME OR THE RESULTS OF AN INVESTIGATION ARE NOT SATISFACTORY FOR ANY REASON, ANY CONSIDERATION, OFFER, OR ACTUAL EMPLOYMENT BY THE COMPANY MAY BE TERMINATED IMMEDIATELY WITHOUT OBLIGATION OR LIABILITY TO ME OTHER THAN PAYMENT AT THE RATE AGREED UPON, FOR SERVICE ACTUALLY RENDERED, FOR THE PERIOD OF TIME I WAS EMPLOYED.

I UNDERSTAND THAT I MAY BE REQUIRED TO UNDERGO BLOOD AND/OR URINALYSIS TESTING FOR CONTROLLED SUBSTANCES AS PART OF THE APPLICATION PROCESS AND AS A CONDITION FOR MY EMPLOYMENT. I FURTHER UNDERSTAND IF I TEST POSITIVE FOR A CONTROLLED SUBSTANCE, EXCEPT IN SUCH INSTANCES WHERE THE SUBSTANCE IS PRESENT PURSUANT TO A CURRENT DOCTOR'S MEDICATION PRESCRIPTION, I WILL NOT BE HIRED, OR IF ALREADY WORKING, THAT I WILL BE TERMINATED. I UNDERSTAND THAT NEITHER THE GRANTING OF AN INTERVIEW NOR ANYTHING CONTAINED IN THIS APPLICATION, COMPANY POLICIES, PROCEDURES, OR HANDBOOKS THAT I MIGHT RECEIVE, ARE INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN THE COMPANY AND MYSELF. NO PROMISES REGARDING EMPLOYMENT HAVE BEEN MADE TO ME AND I UNDERSTAND THAT NO SUCH PROMISE OR GUARANTEE IS BINDING UPON NORDIC MOUNTAIN, LLC UNLESS MADE IN WRITING. I UNDERSTAND THAT IF HIRED MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME AND THAT EITHER I OR THE ROCK MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY REASON. I AGREE TO CONFORM TO THE RULES AND REGULATIONS FOR THE COMPANY.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PLEASE NOTE: If you are applying for a managerial position, we ask that you include a resume and a cover letter detailing the position you are applying for.