

Fraser Valley Metropolitan Recreation District



P.O. Box 3348 Winter Park, CO 80482-3348
Ph. 970-726-8968 Fax 970-726-4034
www.fraservalleyrec.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	Food & Beverage

PARKS & RECREATION:	Camp Counselor	Parks Maintenance
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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: _____

I authorize the FVMRD to do a motor vehicle check if I have applied for a job that:

A) Requires that I operate FVMRD owned or controlled vehicle and/or

B) Requires transportation of children Yes No

Signature

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 style="text-align: center;">\$ /</td> <td>Pay: (end)</td> <td style="text-align: center;">\$ /</td> </tr> </table> Reason for leaving: _____	From: (mo/yr)	/	To: (mo/yr)	/	Pay: (start)	\$ /	Pay: (end)	\$ /
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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

I state that the above information is complete to the best of my knowledge:

Printed Name

Signature

I authorize the FVMRD to do a criminal history background check IF I have applied for a job that:

- A) Requires that I work directly with children and/or
- B) Requires that I have unsupervised access to buildings, or other secure facilities and/or
- C) Requires that I have access to sensitive information

Yes No

Signature

Please remit to:

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