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)

It is the policy of the Fraser Valley Metropolitan Recreation District to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, national origin, gender, age, disability, or veteran status. Please complete entire application. Resumes may be attached.

_ Availa	ole Start Date:		
be interested in:			
Guest Services – Pro Shop/Carts	Bistro 28 – Bev Cart/ Kitchen/Server	Turf Maintenance	
Guest Services - Front Desk	Lifeguard/Water Safety Instructor	Facility Maintenance	
Child Watch/After School Program	Fitness/Gymnastics Instructor	Custodial	
Summer Camp Counselor	Parks Maintenance	Sports/Hockey Referee	
Guest Services - Bowl Desk & POS	Food & Beverage - Kitchen/Server	Custodial	
□ Full-time	□ Part-time	□ Seasonal PT □ FT □	
First Name	Middle Name		
	C-11.44		
	Cell #		
City	State	Zip Code	
City	State	Zip Code	
e eligible	[□ No	
Yes □ No □	If yes, when?		
	Guest Services – Pro Shop/Carts Guest Services - Front Desk Child Watch/After School Program Summer Camp Counselor Guest Services - Bowl Desk & POS Full-time City City	Guest Services – Pro Shop/Carts Guest Services – Front Desk Child Watch/After School Program Summer Camp Counselor Guest Services - Bowl Desk & POS First Name City Bistro 28 – Bev Cart/ Kitchen/Server Lifeguard/Water Safety Instructor Fitness/Gymnastics Instructor Parks Maintenance Food & Beverage - Kitchen/Server Middle Name Cell # City State	

EDUCATION (or attach Resume)

		Nar	ne ar	nd Addre	ess of School		Years 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								
Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the position for which you are applying.								
Please list any current certifications, professional training, or additional training you have								
Please list all machines or equipment you can operate related to the job for which you are applying								
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):								
Are you currently employed?	у		Yes	□ No	If yes, where?			
If yes, may we c your current employer as a re			Yes			No	Comments:	
Are you willing to shift, including n weekends?	o work any		Yes		□ No		Please list I	imitations:

WORK HISTORY (or attach Resume)

List your current or most recent employment first. service. Please explain any gaps in employment.	Please list all jobs in	ncluding self-emp	oloyment an	nd military	
service. Please explain any gaps in employment.					
Employer:					
	Supervisor:				
Address:	_ , , ,	ı	To:	,	
City, St., Zip:	From: (mo/yr)	1	(mo/yr)	1	
оку, ок., др.					
Talanhana	December loss	din a :			
Telephone:	Reason for leav	/ilig.			
Title:					
Duties:					
Employer:	Supervisor:				
Address:	,		To:		
	From: (mo/yr)		(mo/yr)		
City, St., Zip:					
			<u> </u>		
Telephone:	Reason for leav	/ing:			
Title:					
Duties:					
Employer:	O				
Address:	Supervisor:				
Address.	From: (mo/yr)	1	To: (mo/yr)	1	
City, St., Zip:	() ,				
Telephone:	Reason for leaving:				
Title:					
Duties:					
Employer:					
	Supervisor:				
Address:	From: (mo/yr)	I	To: (mo/yr)	I	
City, St., Zip:	r rom. (mo/yr)	•	(IIIO/yI)		
Telephone	Reason for leav	ina:			
Telephone	reason for leav	nng.			
Title:					
Duties:					

I understand that if offered employment with the Fraser Val required to authorize a criminal history background check w			
			(Initia
Do you have a valid driver's license?	Yes □	No □	
Have you worked or attended school under any other name	es? Yes 🗆	No □	
If yes, give names:			
Have you ever been fired from a job or asked to resign?	Yes □	No □	
If yes, please explain:			
REFEREN	CES		
The state of the s	'-l- a rafaran	•	
Please list three non-relatives who would be willing to place. Address)rovide a reference	ce for you. Phone	
Name :		1 Hono	
certify that the above information is true and compl	late to the best	of my knowle(lue.
that the above information to the property in	610 10 11.0 11.1	Ji ing mio	190.
Printed Name	Signature		
Please remit			
Fraser Valley Metropolitan F PO Box 334		:t	
Winter Park, CO 80 Email – hr@fraserva	482-3348		
·	**		

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