APPLICATION FOR EMPLOYMENT



PLEASE PRINT

Date of application:					
Last Name	First Name	Middle			
Street	City	State	Zip		
-					
Telephone	Best time of day t	o reach you: Email			
How did you learn about us?					
Type of employment desired:	Full-time Part-time	Seasonal – May to August	(see Seasonal section below)		
Date you can start work:					
What hours and days of week	are you available to work? _				
Have you ever been employed	here before? Yes \(\square\)	o 🗌			
If yes, when? From: To: Position held?					
Are you authorized to work lawfully in the United States for the Green Lake Conference Center? Yes \(\subseteq \) No \(\subseteq \)					
If you are under 16, can you furnish a work permit if hired? Yes No Not applicable					
Have you ever been convicted of any law violations or have any pending charges (exclude minor traffic violations)? Yes \(\subseteq \) No \(\subseteq \)					
If yes, give details (date and location): (Such convictions may be considered only if substantially related to the position for which you are applying)					
SEASONAL EMPLOYMENT ONLY					
What is the earliest date that you can start work at the beginning of the season?					
What is the latest date you car	work until at the end of the	season?			
EDUCATION					
Name of School	Location (City and State)	Years completed or Degree	Main subjects studied		
High School or GED	Location (Oity and Otate)	rears completed of Deglee	Main Subjects Studied		
College					
Vocational or Technical					
Vocational of Technical					

SPECIAL SKILLS What skills, training, or characteristics will help you perform the job-related functions of the position?				
EMPLOYMENT HISTORY List names of employers in consecutive order with present or any periods of unemployment. If self-employed, give firm name				
Employer	Supervisor			
Address	Employed From (mo/yr): To (mo/yr):			
City, State, Zip Code	Pay Start \$: Final \$:			
Telephone	May we contact this employer? ☐ Yes ☐ No			
Title	Reason for Leaving			
Duties				
Employer	Supervisor			
Address	Employed From (mo/yr): To (mo/yr):			
City, State, Zip Code	Pay Start \$: Final \$:			
Telephone	May we contact this employer? ☐ Yes ☐ No			
Title	Reason for Leaving			
Duties				
Employer	Supervisor			
Address	Employed From (mo/yr): To (mo/yr):			
City, State, Zip Code	Pay Start \$: Final \$:			
Telephone	May we contact this employer? ☐ Yes ☐ No			
Title	Reason for Leaving			
Duties				
REFERENCES List three business/work references who are not related to you.				
Name and Address	Telephone Years Known			

AREAS OF INTEREST

Please check all the areas you would be interested	I in working in:			
 □ Dining Services - Help prepare and so wipe tables or wash dishes so that gue □ Front Desk - Be the first friendly face to are taken care of during their stay and □ Grounds Crew/Greenhouse - Beautify trash and other outdoor tasks. This is □ Housing Services - Provide an excelled and campgrounds spotless. May do late 	ng clean kitchen, dining room, offices and meeting spaces. erve delicious meals. Cook, prep, be a line server, clear dishes, ests are nourished and can enjoy fellowship during mealtimes. to our guests, provide for a smooth check-in, making sure needs making checkout a seamless experience. by the gardens, mow the lawns, maintain the landscape, haul a seasonal position. ent guest stay by keeping our houses, dorms, lodge/inn rooms undry work (washing, sorting and folding). d equipment so that events happen without a hitch.			
	AFFIDAVIT			
PLEASE REA	D CAREFULLY BEFORE SIGNING			
	ation is true and complete. I understand that any false information, ire. If hired, it may result in my dismissal if discovered at a later date. Also, any to refuse to accept this application.			
school, current employer, past employers and organizati	tained in this application. I also authorize, whether listed or not, any person, ons to provide relevant information and opinions that may be useful in making as from any legal liability in making such statements. A photocopy of this release all persons providing information.			
I understand that if I am extended an offer of employmer check, drug screening, reference verification and/or crim	nt it may be conditioned upon my successfully passing a driver's license/record inal background check			
Business needs may make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule other than Monday through Friday. I understand and accept these conditions.				
I understand that this application, subsequent employment employment for any definite period. If employed, I understand be terminated at any time, with or without cause and	ent, or any agreement does not create a contract of employment nor guarantee stand that I will have been hired "at will" of the employer and my employment d with or without notice.			
In compliance with federal law, all persons hired will be recomplete the required employment eligibility verification	required to verify identity and eligibility to work in the United States and to document form upon hire.			
I have read, understand and by my signature consent to	these statements.			
Signature:	Date:			
This application for employment shall be considered acti	ve for a period not to exceed ninety (90) days.			
G W	uman Resource Department reen Lake Conference Center /2511 State Hwy. 23 reen Lake, WI 54941 04/2018F			