

# MIDDLEFORK LODGE

## Employment Application

Please fill out this form then send it by mail or fax.

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

### Personal Information

Name: \_\_\_\_\_

Last

First

Current Address:

Number

Street

Apt#

City

State

Zip Code

Permanent Address (if different):

Number

Street

Apt#

City

State

Zip Code

Current Phone: ( ) \_\_\_\_\_ Permanent Phone (if different): ( ) \_\_\_\_\_

Sex (used for housing purposes only):  M  F

Birth date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If Yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Do you have current CPR and First Aid Certifications?  Yes  No

**Position Desired:**

**First Choice:** \_\_\_\_\_

**Second Choice:** \_\_\_\_\_

**Salary Expected:** \_\_\_\_\_

**Date you can start:** \_\_\_\_\_

**Date You must leave:** \_\_\_\_\_

Students - give yourself a few days between work here and your fall semester.

Foreign Students - give yourself time to sight-see and travel.

**Personal References:**

List two people who can speak about your qualifications and/or character (not previous employers):

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Education:**

**High School Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Year Graduated:** \_\_\_\_\_

**College/Trade School Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Years Completed:** \_\_\_\_\_

**Major:** \_\_\_\_\_

**Employment Experience:**

**Employer Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_\_

**Describe Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Employer Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_\_

**Describe Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Employer Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_\_

**Describe Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Employer Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_\_

**Describe Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Employer Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_\_

**Describe Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Questionnaire:**

1. Please discuss the experience that you have as it relates to the Guest Lodge business.

2. What special skills, talents, and qualifications do you have that can be used at the Lodge (singing, musical instruments, orienteering, etc.)?

3. Tell us in detail why you believe that you would be an asset to our Lodge.

Do you understand that all buildings at Middle Fork Lodge are smoke free. Smoking is allowed within designated areas only? Please initial: \_\_\_\_\_

Middle Fork Lodge has a NO-drugs policy. Please initial: \_\_\_\_\_

**Authorization to Release Information:**

I certify that all of the answers given here are true and complete to the best of my knowledge.

I authorize Middle Fork Lodge to investigate all information contained here, as well as my personal credit information, as may be necessary to make employment decisions.

I authorize all previous employers, supervisors, and other reference persons, including creditors, listed here to release any and all pertinent information requested. I further hold harmless any and all of these persons from any liability related to releasing this information.

In the event of employment, I understand that false or misleading information given by me may result in immediate termination of employment. I understand also that I am required to abide by all of the rules and regulations set forth by the Middle Fork Lodge Management.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, the presence of non job-related medical conditions or handicaps, or any other legally protected status.

## **Send Application to Middle Fork Lodge**

### **Mail the application to:**

Middle Fork Lodge C/O

HC 83 Box 8105

Cascade, ID 83611