

Other machines or tools operated: _

EMPLOYMENT APPLICATION

Applications are retained on file for 12 months (Please Print or Type. Complete all Sections)

Sky High Camping Resort N5740 Sky High Drive Portage, WI 53901 (608) 742-2572

PERSONA	AL INFORI	MATION							
Name:				Soc. Secu	rity #				
	Last	F	ïrst	Middle					
Address:	Number	Street		City		State	Zip		
			Home (•	W				
			-						
Citizenship Status: U.S. Permanent Resident Alien Other (Proof of Citizenship or Immigration Status will be Required Prior to Employment)									
EMPLOYN	IENT INFO	ORMATIO	N						
Employment [d Weekday	Compens	ation Requiremen	ts:		
Position Desired: Inside Staff Only			☐ Outside Staff Only ☐ Both Inside and Outside Staff						
Referral Source		dvertisement		-		Employment Age	encv		
rtororrar oourt									
FRUCATI									
EDUCATION	ON INFOR	MATION							
LEVEL	INSTITUT	ION NAME	YEARS COMPLETED	MAJOR SPECIALI		GRADUATED Yes No	DEGREE		
High School					-				
College/Univ.									
Advanced									
Commercial or Technical									
CERTIFIC	ATION/SP	ECIALIZE	<u>D TRAINING</u>						
Certificate Dat		e Acquired Renewal Date		newal Date	License Number				
MILITARY	SERVICE								
Veteran of U.S	S. Military Ser	vice? □ Ye	s □ No If Yes	s, Branch					
Type of Discharge: Member of Reserves? Yes No If Yes, Branch									
SPECIAL	SKILLS &	QUALIFIC	CATIONS						
			cial skills and qual		nave acquir	ed from employm	ent or other		
List office mad	chine skills:								
List some of	ha alsan								
List computer	background/k	mowieage/pro	gram proficiency:						
Typing Speed	(W.P.M.):								

EMPLOYMENT EXPERIENCE (List Chronogically, Beginning with Present Employer) Phone Number From Mo/Yr To Mo/Yr Last Salary 1. Current Employer Address Supervisor: _____ Job Title: Work Performed: Reason for Leaving: 2. Previous Employer Address Phone Number From Mo/Yr To Mo/Yr Last Salary _____ Supervisor: _____ Job Title: Work Performed: __ Reason for Leaving: 3. Previous Employer Address Phone Number From Mo/Yr To Mo/Yr Last Salary Job Title: _____ Supervisor: ____ Work Performed: Reason for Leaving: ____ **MISCELLANEOUS** Have you ever filed an application with us before? ☐ Yes ☐ No If Yes, when? _____ Have you ever worked for us before? ☐ Yes ☐ No If Yes, when? _____ _____ Reason for Leaving: ____ Are any of your relatives (including in-laws) currently employed by our Company: \(\subseteq \text{Yes} \subseteq \text{No} \quad \text{If Yes}, Relationship: Have you ever been convicted of a felony within the last seven (7) years? ☐ Yes ☐ No If Yes, Date: _____ Place: ____ Charge: _____ Disposition: _____ Do you have a valid driver's license: ☐ Yes ☐ No If No, Reason: ____ Is there anything that would prevent you from employment consideration with our Company? ☐ Yes ☐ No Have you ever been discharged or asked to resign from a position? ☐ Yes ☐ No If Yes, details: _____ Why do you wish to make a job change at this time? Are you able to perform the essential job functions of the position you are applying for (i.e., weekends, arrive timely)? Do you require any special accommodations? Yes No If Yes, please explain:

REFERENCES							
Personal (Excluding R	telatives)						
Name	Address		Phone	Association			
1.							
2.							
3.							
Business/Professiona	I						
Name	Place of En	nployment/Occupation	Phone	Association			
1.							
2.							
3.							
APPLICANT STAT	EMENT						
consideration or may be cause for	my discharge. I affirm that applying for a job with the C	I have a genuine intent in em	ployment with Sky I	issions will disqualify me from employment High Camping Resort, Inc. (hereinafter "the formation discovered may prevent my being			
information pertaining to my person employers, references, credit report	al history, education, criminal ing agencies/bureaus, educat as requested by the Compa	conviction record and financial/ ional institutions and any other ny either prior to, during or afte	credit record. I also person(s), institution	plication and/or resumé submitted, including b authorize all of my current and/or previous s or agencies contacted by the Company to and I release all parties, including Sky High			
				s, any trade secrets or confidential, technical cept with the Company's written permission.			
In consideration of my employment, I agree to conform to and abide by the rules, regulations, policies and procedures of Sky High Camping Resort, Inc. I understand that my employment benefits and compensation can be terminated with or without cause, and with our without notice, at any time, at the option of either the Company or myself. I understand that no employee, representative or agent of Sky High Camping Resort, Inc. has the authority to enter into any oral or written agreement for employment for any period of time or to make or imply any agreement contrary to the foregoing. I further understand that this document, any employment interviews or any offer of employment does not constitute an employment contract and that any employment with Sky High Camping Resort, Inc. is strictly on an at-will basis.							
If employed by Sky High Camping Resort, Inc., I understand that I will receive a copy of the Sky High Camping Resort, Inc. Company Employee Handbook, which outlines the Company benefits, policies and procedures, as well as my employment responsibilities. I understand that it is my responsibility to read, know and follow all policies contained within this Handbook. I also understand that the information contained within this Handbook is subject to change as situations warrant and the Company has the right to amend this information unilaterally, with our without prior notice. I also understand changes in the policies may supersede modify or eliminate the policies contained in the Handbook, in any way whatsoever, without prior notice.							
				liability for wages or benefits except such as ts and conditions of employment at any time			
	I further understand and agree	that if I am unable to perform s	uch job functions wit	ility to perform the essential job functions of h reasonable accommodation that such offer			
I understand and agree to all param or facsimile of this authorization acc			gnature below, I also	certify that I am willing to have a photocopy			
Applicant Signature _	Date						
FOR ADMINISTRATIV	E USE ONLY						
A	l	0	H				
(Date)	(Date)	(Date)		(Date)			
Job Title:							
Remarks:							