WOLF CREEK
THE MOST SNOW IN COLORADO®
P.O. Box 2800, Pagosa Springs, CO 81147

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER. Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. **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 upon non-job-related factors.

Name _____ Today's Date _____

Address _____ Email _____

_____ Are you 18 years of age or older? _____
(If you are hired, you may be required to submit proof of age.)

Telephone # _____

If hired, can you furnish proof you are eligible to work in the United States? _____
Have you ever filed an application with us before? _____ If yes, give year _____
Have you been employed with us before? _____ If yes, give department & year _____

List preferred departments (1st, 2nd, 3rd) that you are interested in. **(Please number choices by priority (i.e. 1st, 2nd, and 3rd).**

INDOOR POSITIONS:

Ticket Sales _____ Food Service or Bar _____ Cashier F&B _____ Ski Rental _____

Snow Reporter/Guest Services _____ Ski Schl Reservationist _____ Wolf Pup Bldg Attendant _____

Retail Sport Shop _____ Custodial Maintenance _____ Building Maintenance _____

Heavy Equipment Mechanic _____

OUTDOOR POSITIONS:

Base Operations/Parking _____ Ski Patrol* _____ Grooming _____ Snow Removal _____
*Ski Patrol requires CPR and EMT training. All cards must be current.

Ski Lifts/Ticket Checking _____ Ski School Instructor_____ Snowboard School Instructor_____
*Ski & Snowboard Instructors undergo a criminal background check.

PREVIOUS EXPERIENCE

Education: High School _____ College _____ Other _____

Major fields of study or training _____

Do you speak a foreign language? (beneficial for certain positions) _____

Jobs: Give nature of last 3 jobs; and business names, addresses and phone numbers of employers.
1) _____
2) _____
3) _____

References: Give names, addresses and phone numbers of employment references.
1) _____
2) _____
3) _____

Why did you leave your last 3 jobs? (please be specific)
1) _____
2) _____
3) _____

Do you have experience running machinery of any kind? _____ If so, which type of equipment? _____
_____
_____
_____

Do you have computer or office equipment experience? _____ If so, which computers, programs and equipment?

_____

_____

What is your skiing/snowboarding experience and/or other qualifications? _____

_____

_____

Any other information about yourself that may have a bearing on your employment: _____

_____

Why would you like to work at Wolf Creek Ski Area? _____

_____

When can you start work? _____ How many hours per week would you like to work?_____

Circle one: +24 HRS./WEEK -24 HRS./WEEK HOLIDAYS

Until what date can you work? _____

AFFIDAVIT, CONSENT and RELEASE: Please read each statement carefully before signing.

I certify that all information provided in the employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE CEO OF THE WOLF CREEK SKI AREA HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE CEO AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature _____ Date _____

This application for employment will remain active for 90 days.

(FOR SKI AREA USE ONLY)

Interviewed by _____ Dept. _____ Date _____

Interviewer Comments _____

_____

References checked? _____

Hired? _____ Department _____

Part-time seasonal, start date _____ Full-time seasonal, start date _____

Holidays only, start date _____ Full-time year-round, start date _____