

LANDERS RIVER TRIPS

LANDERS RIVER TRIPS PROVIDES EQUAL EMPLOYMENT OPPORTUNITIES WITHOUT REGARD TO RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, HANDICAP, AGE, DISABILITY OR ANY OTHER REASON PROTECTED BY LAW.

PLEASE READ CAREFULLY: ANSWER ALL QUESTIONS; PRINT CLEARLY IN INK IF ANY ADDITIONAL SPACE IS REQUIRED,
ATTACH ADDITIONAL PAPER. MANAGEMENT AND PROFESSIONAL APPLICANTS MUST ATTACH A RESUME.

TODAY'S DATE

PERSONAL

LAST NAME		FIRST NAME		MIDDLE	SOCIAL SECURITY NO.	
ADDRESS	STREET	APT.	CITY	STATE	ZIP CODE	
HOME PHONE	MESSAGE PHONE	HAVE YOU BEEN PREVIOUSLY EMPLOYED BY LANDERS RIVER TRIPS? IF YES, DATES: FROM: TO: LOCATION: POSITION:		___ YES ___ NO		
ARE YOU 16 YEARS OF AGE OR OLDER? ___ YES ___ NO		IF UNDER 16, CAN YOU, AFTER EMPLOYMENT, SUBMIT A WORK PERMIT? ___ YES ___ NO				
CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES? ___ YES ___ NO						
HAVE YOU EVER BEEN CONVICTED OF A CRIME INVOLVING THE ABUSE, NEGLIGENCE OR MISTREATMENT OF AN INDIVIDUAL, OR ANY OTHER FELONY OR MISDEMEANOR? (EXCEPT ROUTINE TRAFFIC VIOLATIONS). A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU. ___ YES ___ NO (IF YES, LIST BELOW)						
OFFENSE(S)	DATE	PLACE	DISPOSITION			

HOW DID YOU HEAR OF THE JOB OPENING

JOB INTEREST

FIRST CHOICE		SECOND CHOICE		DATE AVAILABLE	SALARY REQUIRED	
POSITION(S) DESIRED						
WORK HOURS/SHIFT	FULL TIME	PART TIME	DAYS	EVENINGS	NIGHTS	WEEKENDS
PREFERRED	___ YES ___ NO	___ YES ___ NO	___ YES ___ NO	___ YES ___ NO	___ YES ___ NO	___ YES ___ NO

EDUCATIONAL RECORD

CIRCLE HIGHEST GRADE COMPLETED	GRAD SCHOOL & HIGH SCHOOL		COLLEGE OR GRAD. SCHOOL	
	1 2 3 4 5 6 7 8 9 10 11 12		1 2 3 4 5 6	

SKILLS

WORK EXPERIENCE

MAY WE CONTACT YOUR PRESENT EMPLOYER? _____		WHAT OTHER NAME(S) HAVE YOU WORKED UNDER?			
LIST YOUR LAST OR PRESENT EMPLOYER FIRST (INCLUDING VOLUNTEER EXPERIENCE) AND ACCOUNT FOR ANY LAPSE OF TIME BETWEEN EMPLOYMENT (USE ADDITIONAL PAPER IF NECESSARY)					
EMPLOYER	EMPLOYED FROM:		MO.	YR.	TO: MO. YR.
ADDRESS	STREET	CITY		STATE	PHONE
POSITION TITLE	SALARY		STARTING	FINAL	
		\$		\$	
SUPERVISOR'S NAME AND TITLE		PERSON(S) WE MAY CONTACT FOR REFERENCE			
BRIEFLY DESCRIBE YOUR DUTIES					
REASON FOR LEAVING					
EMPLOYER	EMPLOYED FROM:		MO.	YR.	TO: MO. YR.
ADDRESS	STREET	CITY		STATE	PHONE
POSITION TITLE	SALARY		STARTING	FINAL	
		\$		\$	
SUPERVISOR'S NAME AND TITLE		PERSON(S) WE MAY CONTACT FOR REFERENCE			
BRIEFLY DESCRIBE YOUR DUTIES					
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EMPLOYER	EMPLOYED FROM:		MO.	YR.	TO: MO. YR.
ADDRESS	STREET	CITY		STATE	PHONE
POSITION TITLE	SALARY		STARTING	FINAL	
		\$		\$	
SUPERVISOR'S NAME AND TITLE		PERSON(S) WE MAY CONTACT FOR REFERENCE			
BRIEFLY DESCRIBE YOUR DUTIES					

REASON FOR LEAVING							
EMPLOYER		EMPLOYED FROM:	MO.	YR.	TO:	MO.	YR.
ADDRESS	STREET	CITY		STATE	PHONE		
POSITION TITLE			SALARY	STARTING	FINAL		
				\$			\$
SUPERVISOR'S NAME AND TITLE			PERSON(S) WE MAY CONTACT FOR REFERENCE				
BRIEFLY DESCRIBE YOUR DUTIES							
REASON FOR LEAVING							
<p>PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION FORM:</p> <p>I authorize investigation of all statements contained in this application blank if I am considered for employment. I also authorize previous employers mentioned or any other person or persons to whom Landers River Trips may contact, to give any and all information regarding any employment history together with any other pertinent information.</p> <p>I understand that misrepresentation or omission of the facts requested, the receipt of unsatisfactory references, or an unsatisfactory ability to meet the physical demands which reveals that I cannot perform the essential functions of my job with or without reasonable accommodation, will be a sufficient reason for dismissal from the company's services. In the absence of a written contract of employment, employment by Landers is employment at the will of each party. The employment relationship may be terminated at any time at the sole discretion of the employee or Landers.</p>							
SIGNATURE						DATE	
You may use the space below to write any additional comments.							