

### 64640 Old Bend Redmond Hwy Bend, OR 97703 541.389.8474

# **EMPLOYMENT APPLICATION**

This application must be completed in its entirety, but its receipt does not imply that the applicant will be employed. We consider applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status. An offer of employment, if tendered, is contingent upon the results of a drug test. This application will expire six months from the date of submission.

#### Personal Information:

Name:	Last	First		Middle
Address:				Wildaic
	Street	City	State	Zip
Telephone Home: (	)	Social Security No:		
Telephone Cell: (	)	E-mail:		
Previous Address: (If	less than one year	at current address)		
Other Names you have	e used:			
In Case of Emergency	y, notify:			
Name:		Address:		
Telephone: Work (	)	Home ( ) _		
Position Desired:		Salar	y Desired:	
Are you applying for:	Temp Work   Su	mmer/Holiday   Regular Full Tim	e   Regular Part Tim	ie
How did you hear abo	out this position?			
		or Mountain Sky Inc?		
Have you worked for	Mountain Sky Inc	before? (If yes, give dates)		
			Y=YES/N=N	NO
Are you at least 18 ye			<u>Y/N</u>	
Are you legally eligib		in the United States?	<u>Y/N</u>	
Do you have a valid d			<u>Y/N</u>	
Have you given your			<u>Y/N</u>	
May we contact your			<u>Y/N</u>	
Have you been convid			V/N	
violation in the las	t 7 years? If yes, e	explain below.	_Y/N	

#### References:

Name	Contact Information, Phone and Email
2	
3	

## \*\*Mountain Sky Inc. is an Equal Opportunity Employer\*\*

Jame/Address	tory: (Most recent to oldest)  Supervisor	From	To	Duties		Reason for Leav
	•					
Education:						
Tour	Calara I Nama /I anadian		M-:	Last Year	Graduate	D
	School Name/Location		•	Completed 9 10 11 12	Yes/No	Degree
High School Junior College				12		
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1						
11						
(- p)						
Training:						
	rses, seminars, training and jo					
perform the position	for which you are applying _					
Check each certifica	te that you hold and provide	expiration				
☐ Heavy Equipm	entExpires:		□ OSHA 1 □ OSHA 3		es: es:	
□ Forklift			□ GSHA : □ First Ai		es:	
T.,	1 . 1 . 1			CC:1: 4 1 41 4	1 1 14 4	6
	l, trade, or business organizating.					
winen you are appry	<u> </u>					
Skills and Qualifi	ications:					
	proficiency in the following:	:				
□ Excel	□ Word				k	
□ MS Project	Dowerpo			□ Publis	her	
□ Rapid PO		ecify)				
Employment D	icologura					
	ion certifies that my answers to	the foregoi	na question	ns ara COMDI ET	E AND TOL	THEIII and the
	ng false or materially incomplet					
	oyment if discovered after the da					
Thereby authorize Mour	ntain Sky Inc. to investigate my	hackgroup	d. referenc	es, emnlovment h	story crimins	al background as
education. I also underst	tand and agree that any employr ninated by me or employer at an	nent that m	ay be offer	ed to me is at will,	that it is for n	
						1
Motor Mc1: '11	he denied assessing to 1 1					
	be denied employment solely of mstances and relevance to the po					e date, nature, ar
				nay, however, be co		