

Alpine Valley Ski Area, INC.

6775 Highland Road, White Lake, MI 48383 * Phone: 248-887-2180 * Fax: 248-887-0139* info@skialpinevalley.com

Application for employment

The Michigan Employment Security Commission has designated Alpine Valley Ski Area, Inc. a SEASONAL EMPLOYER

PERSONAL

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE _____

Phone: _____ e-mail: _____

Please Check: 18 yrs. (or over) _____ If under 18, indicate age: _____ under 18 requires a Work permit from your school. It must be completed & approved before your application can be processed.

Have you ever worked for a ski resort the past? (Circle) yes ___ no ___ If yes, when _____

EDUCATION

HIGH SCHOOL: _____ Year Completed _____

COLLEGE: _____ Year Completed _____

OTHER/VOCATIONAL: _____ Year Completed _____

ARMED SERVICES: _____ Honorable Discharge? Yes No Date: _____

POSITION DESIRED

List:

First choice: _____ Second: _____ Third: _____

Inside: cafeteria, rental, ski shop, tech work*, ski/board instructor, ticket office*, lounge,*
guest services* (lockers, candy machine, shovel/salt walkway, empty trash...)

Outside: towrope operator*, chairlift operator* Snowmaking*(midnights)

*Must be 18 years of age

AVAILABILITY

Please check approximate times

Monday: 9:30am-4 pm _____ 3-10 pm _____

Friday: 9:30am-4 pm _____ 3-10 pm _____

Tuesday: 9:30am-4 pm _____ 3-10 pm _____

Weekends

Wednesday: 9:30am-4 pm _____ 3-10 pm _____

Saturday: 8:30am-4 pm _____ 3-10 pm _____

Thursday: 9:30am-4 pm _____ 3-10 pm _____

Sunday: 8:30am-4 pm _____ 3-9 pm _____

PERSONAL REFERENCES

Name _____ Yrs. Known _____ Phone _____

Name _____ Yrs. Known _____ Phone _____

Name _____ Yrs. Known _____ Phone _____

EMPLOYMENT HISTORY

Start with present or most recent employer.

1. Company _____ Supervisor _____

Employed from: _____ to _____ Phone _____

Duties: _____ Reason for leaving _____

2. Company _____ Supervisor _____

Employed from: _____ to _____ Phone _____

Duties: _____ Reason for leaving _____

3. Company _____ Supervisor _____

Employed from: _____ to _____ Phone _____

Duties: _____ Reason for leaving _____

Have you ever been suspended, fired or asked to resign from any position? (circle) yes no
If yes, give details and exact name & telephone # of supervisor & address of place of work.

Have you ever pleaded guilty, no contest or been convicted of a crime? (circle) yes no

I (print name) _____ authorize Alpine Valley to do any and all background checks they deem necessary before employment.

SIGNATURE: _____

We are an equal opportunity employer. All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital status, or any other status protected by the laws. I hereby declare the information provided is true and complete to the best of my knowledge.

I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal. Alpine Valley is an at will employer.

SIGNATURE: _____ **DATE** _____