

Mt Baldy Ski Lifts, Inc..
Office: (909) 982-0800

Mail Back To: Mt Baldy Ski Lifts
P.O. Box 459
Mt Baldy, Ca 91759

Employment Application

2005-2006 Season

Date _____

Name _____ SS# _____

Address _____ **DOB** _____

City _____ State _____ Zip Code _____

Telephone # _____ Pager, Cell, etc. _____

Are you of legal age to work? _____ **If no, do you have a work permit?** _____

Nearest relative not living with you Name _____

Relation? _____ Phone# _____

Address _____ City _____

State _____ Zip _____ In case of Emergency contact _____

Ph# _____ Relation? _____

Do you have a valid California driver's license? _____ DL # _____

Do you have your own vehicle? _____ Make _____

Year? _____ Color _____ Lic. Plate # _____

Have you ever been convicted of a felony? _____

Position Applying for:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Lift Operator | <input type="checkbox"/> Ticket Office | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Ski Patrol | <input type="checkbox"/> Ski/Board Instructor | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Parking lot attendant/security | <input type="checkbox"/> Any | <input type="checkbox"/> Other _____ |

Do you have any experience for the position your applying for? _____

Full or Part time work? _____ Day or Nights? _____

Days Available Throughout Season

Monday _____ Tuesday _____ Wednesday _____ Thursday _____

Friday _____ Saturday _____ Sunday _____

Are you available to work weekends and holidays? _____

Are there any times during the day you are not available to work? _____

Education

Circle last grade completed 1 2 3 4 5 6 7 8 9 10 11 12 College 13 14 15 16 17 18 19 20

So you have a high school diploma or equivalency? _____

School _____

List any school course or vocational training, licenses, certificates, or other qualifications that bear on your suitability for this position:

Work History – Begin with your most recent job.

Employer _____

Job Duties _____

From _____ To _____

Supervisor Name _____ **Ph#** _____

Employer _____

Job Duties _____

From _____ To _____

Supervisor Name _____ **Ph#** _____

May we contact your past employers? _____