5662 State Route 64 Canandaigua, NY 14424 585-374-1180 585-374-2253 Fax www.bristolmountainadventures.com



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Int Date/Time	:	

Bristol Mountain Aerial Adventures is an equal opportunity employer. All applicants are considered without regard to race, age, color, gender, ethnic group, national origin, religion, citizenship, marital status, sexual orientation, veteran status, physical or mental disability, or medical condition. Applications must be submitted in person to Bristol Mountain.

Last Name			DN First Name I			MI	T	Today's Date			
Address			Town/Zip				Are you 18 years old or olde Yes No			s old or older	
Home Telephor	ne		Cell Phone		Work Telephone			Are you 15 years old or			
()			()		()	()			younger? Yes No		
E-Mail Address											
EMPLOYMEN ¹	Γ DESIR	RED									
Position Applie	d for.										
	Would you like to work: (circle all that apply) Full Time Part Time				Wage Desired:						
What days and times are you available for work? (Also, indicate any days you are unable to work)				Start	Start Date:			End Date:			
Monday Tuesda		esday	Wednesday	/ Thurs	sday	ay Friday		Saturday		Sunday	
EDUCATION											
Level		Name and Address					Major Studies				
High School				224							
College, Vocati Other	onal,										
MILITARY	'					1					
Branch			Dates of Service			Final Rank		Special Training			
		;	Start Date								
			End Date								
SKILLS											
Certificates or S	Special	Training									
Compositor Chille	s (hardw	/are/sof	tware)								
Computer Skills											

this job? (exclude any membership which would reveal race, religion, sex, age, national origin, or ancestry of its members)

b Title					Reason for Leaving		
Duties, Responsibilities, Pro	omotions				Salary		
Dates of Employment	Employer Name a	and Address	Supervisor Name and Job Title		Phone Number		
From: To:							
Job Title					Reason for Leaving		
Duties, Responsibilities, Pro	omotions				Salary		
Dates of Employment	Employer Name a	and Address	Supervisor Name and	Job Title	Phone Number		
From: To:	1 1						
Job Title					Reason for Leaving		
Duties Despusabilities Du					Colomi		
Duties, Responsibilities, Pro	omotions				Salary		
CHARACTER REFEREN			ot related to you and				
Name	Phor	ne Number		Relations			
				Years Kr	(nown		
Name	Phor	ne Number		Relations	ship		
			Ţ	Years Kr			
Name	Phor	Phone Number		Relations	ship		
				Years Kr			
GENERAL							
Are you currently employ	red? Yes No						
If yes, may we contact yo		r? Yes I	No				
Have you ever worked fo				hich depa	artment?		
Have you ever worked fo				departme	ent?		
Have you ever been conv		Yes No	If yes, explain:				
If offered employment, w							
lf under 18 years old, will		ide working j	papers from your scho	ol? Yes	s No		
APPLICANT STATEME	NT						
l understand and agree to the	ne following:						
This application is not a con	tract of employment.						
All offers of employment are	e conditional based on	passing our p	hysical fitness test.				
Should the employer hire mincomplete, I shall be subject		e information	I have given in this applic	cation be fo	ound false, misleading, or		
The employer follows an "at reason consistent with the a		cy, meaning th	ne employer or I may tern	ninate emp	ployment at any time for any		
All hired persons must providenial of employment.	ide proof of identity and	d authorization	n to work in the U.S. Fai	lure to pro	oduce such proof will result in		
I authorize investigation of a reference, or employer lister authorize those employers t	d on this application, e	xcept my curr	ent employer if so noted,	to verify th	ne information I have given.		
I certify that all the informati	on in this application is	s complete and	d true.				
Signature of Applicant			 Date				
	PLICATIONS WILL RE	FMAIN ON FII	LE FOR THE CURRENT	HIRING S	SEASON ONLY		

Please list employment record, starting with the most recent.

Employer Name and Address Supervisor Name and Job Title Phone

Phone Number

EMPLOYMENT HISTORY

To:

Dates of Employment

From: