



59 West Mountain Rd.
 Queensbury, NY 12804
 Phone: 518-793-6606

Application for Seasonal Employment

Date _____

BE PREPARED TO WORK OUTDOORS IN COLD, WINTER CONDITIONS

I UNDERSTAND THAT NEITHER THIS APPLICATION NOR ANY COMMUNICATION BY A MANAGEMENT REPRESENTATIVE IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN AT-WILL BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE. IN ACCORDANCE WITH STATE LAW, AN ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON.

Please number job(s) desired (qualified for) in the order of preference. List only top choices, numbered 1,2,3,4 & 5.

Lift Operations

____ Day Lift Attendant 18+

____ Night Lift Attendant 18+

____ Ticket Checker 14+

Cafeteria

____ Line Cook 16+

____ Cashier 14+

____ Food Line/Runner 14+

Tube Park

____ Lift Operator 18+

Lounge/Bar

____ Bartender 21+

____ Server 18+

____ Cook 16+

____ Bar back 18+

Retail

____ Ticket Seller 14+

Rental Shop

____ Ski Tech . 16+

Snowsports

____ Ski Instructor 14+ *

____ Snowboard Ins. 14+ *

____ Snow Supervisor 18+ *

Race Department

____ Coach *

Outside

____ Outdoor Mechanic 18+

____ Groomer 18+

Snowmaking 18+

____ Day Snowmaker (6am-6pm) _____ A/P & A/R*

____ Night Snowmaker (6am-6pm) _____ Payroll Admin.*

Business Office

* These positions require certification and /or specific training.

____ Last _____ First _____ M.I.

____ - ____ - ____
 Social Security Number

 Number & Street

____ City _____ State _____ Zip

 Phone Number

 Cell Number

If under the age of 18, can you produce the necessary work certificate at the time of employment?

YES ____ NO ____

Have you ever been employed by West Mountain? IF yes, list dates of employment, job titles: YES ____ NO ____

List all special technical skills that you feel qualify you for the job for which you are applying.

List Hobbies and special interests that are relevant to the position for which you are applying.

SCHOOL	NAME OF SCHOOL AND LOCATION	GRADUATE ? YES OR NO	CIRCLE HIGHEST GRADE COMPLETED	MAJOR
HIGH SCHOOL			9 10 11 12	
COLLEGE			1 2 3 4	
OTHER			1 2 3 4	

EMPLOYMENT HISTORY (Give present or most recent first.)

Dates: From: To:	Company	Address & Phone Number
Wage: Start: End:	Occupation & Job Duties	Reason for leaving
Supervisor's Name & Title: _____ May we contact? ___ Yes ___ No If No, please explain _____		
Dates: From: To:	Company	Address & Phone Number
Wage: Start: End:	Occupation & Job Duties	Reason for leaving
Supervisor's Name & Title: _____ May we contact? ___ Yes ___ No If No, please explain _____		

Please explain fully all gaps in your employment history in excess of one month.

Have you ever been terminated or asked to resign from any job? ___ Yes ___ No
 Has your employment ever been terminated by mutual agreement? ___ Yes ___ No
 Have you ever been given the choice to resign rather than be terminated? ___ Yes ___ No
 If you answer Yes to any of the above three questions, please explain the circumstances of each occasion.

REFERENCES Please list personal references— (not previous employers or relatives)			
Name	Address	Phone Number	# of Yrs Known

I understand that West Mountain may now have a drug-free workplace or drug and/or alcohol testing program consistent with federal, state, and local law. If West Mountain has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer drug and/or alcohol test is positive, the employment offer may be withdrawn). I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of West Mountain, pursuant to West Mountain's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with West Mountain's policies and applicable federal, state, and local law.

If employed by West Mountain, I understand and agree that West Mountain, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I certify that all the information on this application, my resume, or any supporting documents I may present is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

Date: ___ / ___ / ___ Signature: _____

Office Use Only:	Department _____
Start Date _____ Salary _____ Position _____	Supervisor _____



59 West Mountain Rd.
 Queensbury, NY 12804
 Phone: 518-793-6606
 Fax: 518-793-6698

Name _____

Position _____

DISCLOSURE STATEMENTS

PRIOR CRIMINAL CONVICTIONS WILL NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT WITH WEST MOUNTAIN SKI AREA.

The management at West Mountain will consider the nature of the crime, its seriousness, whether the conviction(s) substantially relates to the position's functions and qualifications, the frequency of convictions, the applicant's age at the time of conviction, the time elapsed since the date of conviction or completion of jail sentence, the applicant's entire work and educational history, and employment references and recommendations.

In reference to the following two questions:

Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convictions that resulted in referral to a diversion program.

Have you ever plead guilty or no contest to, or been convicted of any criminal offense other than the exception listed above?

_____ Yes _____ No

Have you ever been arrested for any matters for which you are out on bail or on your own recognizance pending trial?

_____ Yes _____ No

Have you ever initiated an act of violence in the workplace? _____ Yes _____ No

If Yes, please provide the date(s) and explain so that individual circumstances can be considered. (A "Yes" answer will not necessarily disqualify you from employment.) _____

I certify that all the information on this DISCLOSURE STATEMENT or any other documents I may present, is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

Date: _____ / _____ / _____

Signature: _____

Note:

An ex-offender who is denied employment may, upon written request, receive a statement of the reason(s) for denial within 30 days of request for such information.

