

WHITEWATER CHALLENGERS EMPLOYMENT APPLICATION

Date of Application: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home): _____ Best time to call: _____

(Cell): _____ Best time to call: _____

(Other): _____ Best time to call: _____

Email address: _____

Emergency contact person: _____ / Relationship: _____

Address: _____ Phone: _____

EDUCATION:

Name of School	# of Years	Graduated?	Field of Study/Degree Earned

EMPLOYMENT EXPERIENCE (list most recent first):

Employer Name & Dates: _____

Supervisor's Name: _____

Position / Title: _____

Responsibilities: _____

Starting / Ending Salary _____

Reason(s) for Leaving: _____

Employer Name & Dates: _____

Supervisor's Name: _____

Position / Title: _____

Responsibilities: _____

Starting / Ending Salary _____

Reason(s) for Leaving: _____

Employer Name & Dates: _____
Supervisor's Name: _____
Position / Title: _____
Responsibilities: _____
Starting / Ending Salary _____
Reason(s) for Leaving: _____

Employer Name & Dates: _____
Supervisor's Name: _____
Position / Title: _____
Responsibilities: _____
Starting / Ending Salary _____
Reason(s) for Leaving: _____

Please describe any military experience, including dates, rank and duties performed: _____

Please check any area(s) of work for which you are applying:

- | | | |
|--|--|--|
| <input type="checkbox"/> River Guide | <input type="checkbox"/> Bus Driver (CDL) | <input type="checkbox"/> Kayak Instruction |
| <input type="checkbox"/> Office/
Reservations | <input type="checkbox"/> River Equipment
Crew | <input type="checkbox"/> General Maintenance |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Food Service | <input type="checkbox"/> Campground
Attendant |
| <input type="checkbox"/> Store/cashier | <input type="checkbox"/> Biking Guide | |
| <input type="checkbox"/> Other (please specify): _____ | | |

Describe any skills or experience that you would bring to the positions checked above:

Desired work: Full time:_____ Part-time:_____ Seasonal:_____ Year-'round: _____

Days of the week you are available to work (circle): Mon Tue Wed Thu Fri Sat Sun

Hours of the day you are available to work: _____

Date you are available to begin work: _____

If there is a time you are unable to be at work, please describe: _____

If still in high school, do you have the required working papers for employment?
Yes___ No___

If still in high school, do you have transportation to and from work? Yes___ No___

Do you have a valid driver's license? ___ State:___ License #:_____

Have you been convicted of any crime? Yes___ No___

If yes, describe in full: _____

Have you ever worked for us before? Yes___ No___

If yes, when and in what capacity: _____

Have you ever worked for another rafting company? Yes___ No___

Do you know anyone who is employed at Whitewater Challengers? Yes___ No___

PERSONAL REFERENCES (other than former employers or relatives):

Name _____

Occupation _____

Years Known _____

Address _____

Phone Number(s) _____

By signing this application, I authorize Whitewater Challengers to contact the employers and personal references listed above to discuss my background, qualifications, work experience or other matters related to my application for employment. If there is anyone excluded from this authorization, his/her name is listed below:

By signing below, I also attest that all of the information provided herein is true and accurate, and that if employed, any misleading, incomplete or false statements made herein may be cause for dismissal.

My name (Print):_____ (Signature):_____