

# NASHOBA VALLEY SKI AREA

P.O. Box 309 ✕ 79 Powers Road ✕ Westford, MA 01886 ✕ (978) 692-3033

## APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE - EQUAL OPPORTUNITY EMPLOYER  
 PROOF OF CITIZENSHIP OR IMMIGRATION IS REQUIRED UPON EMPLOYMENT

DATE OF APPLICATION:

NAME (LAST, FIRST)	EMAIL
MAILING ADDRESS	CITY, STATE, ZIP
PRIMARY PHONE	ALTERNATE PHONE
EMERGENCY CONTACT NAME	EMERGENCY CONTACT NUMBER
HOW DID YOU HEAR ABOUT US?	

- HAVE YOU EVER BEEN EMPLOYED HERE BEFORE? YES \_\_\_\_ NO \_\_\_\_  
 IF YES, GIVE DATES \_\_\_\_\_ POSITION \_\_\_\_\_
- ARE YOU: UNDER 18 \_\_\_\_ 18 OR OLDER \_\_\_\_  
 IF UNDER 18, CAN YOU PROVIDE A WORK PERMIT? YES \_\_\_\_ NO \_\_\_\_
- DO YOU HAVE ANY PRIOR COMMITMENTS (SUCH AS SNOW PLOWING) THAT WOULD INTERFERE WITH YOU FULFILLING YOUR SCHEDULE HERE? YES \_\_\_\_ NO \_\_\_\_  
 IF YES, PLEASE EXPLAIN: \_\_\_\_\_

PUT AN "X" IN FRONT OF EACH POSITION THAT YOU WISH TO BE CONSIDERED FOR:

_____ RENTAL SHOP	_____ SNOWMAKING (MUST BE 18 OR OLDER)
_____ CUSTOMER SERVICE / SALES	_____ LIFT OPERATOR (MUST BE 18 OR OLDER)
_____ TICKET SALES	_____ SNACK BAR
_____ TUBING PARK OPERATOR	_____ SKI PATROL
_____ MAINTENANCE	_____ CONSIDER ME FOR ALL POSITIONS

IN THE TABLE BELOW, INDICATE ALL TIMES THAT YOU COULD BE AVAILABLE TO WORK.

	MON	TUE	WED	THURS	FRI	SAT	SUN
TIME YOU COULD START							
TIME YOU MUST LEAVE							

HOW MANY HOURS PER WEEK DO YOU WANT TO WORK? \_\_\_\_\_

HOW MANY DAYS PER WEEK DO YOU WANT TO WORK? \_\_\_\_\_

ON WHAT DATE WOULD YOU BE AVAILABLE TO START WORK? \_\_\_\_\_

FOR OFFICE USE ONLY			
W4:	Date:	I9:	Date:
		Under 18 - <b>WORK PERMIT:</b>	

**DESCRIPTION OF YOUR EDUCATION**

NAME AND LOCATION OF SCHOOL	DATES ATTENDED	DID YOU GRADUATE?	COURSE OF STUDIES
HIGH SCHOOL			
COLLEGE / TRADE			
GRADUATE / TRADE			

**PROVIDE A BRIEF EMPLOYMENT HISTORY**

EMPLOYER NAME	DATES OF EMPLOYMENT	SUPERVISOR	SUPERVISOR CONTACT
SALARY	POSITION	REASON FOR LEAVING	
EMPLOYER NAME	DATES OF EMPLOYMENT	SUPERVISOR	SUPERVISOR CONTACT
SALARY	POSITION	REASON FOR LEAVING	

MAY WE CONTACT YOUR CURRENT EMPLOYER? YES \_\_\_\_\_ NO \_\_\_\_\_

**PROVIDE PERSONAL REFERENCES (AT LEAST 3)**

NAME	PHONE	EMAIL	ADDRESS	BUSINESS NAME

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGES THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.

I UNDERSTAND AND AGREE THAT IF HIRED, MY EMPLOYMENT WILL BE AT WILL IN NATURE AND MAY BE TERMINATED, WITH OR WITHOUT CAUSE, AT ANY TIME, BY EITHER MYSELF OR MY EMPLOYER.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_