



## Application for Employment

**Please submit your resume with this application**

**Personal Information**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Present Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_

Are you 16 years or older? Yes\_\_\_ No\_\_\_ If not, do you have a work permit? Yes\_\_\_ No\_\_\_

Do you have any physical ailments which preclude you from performing certain kinds of work?  
Yes\_\_\_ No\_\_\_

If yes, please describe each and specify your work limitations.

**Desired Employment**

Position you are applying for: \_\_\_\_\_

Date you can start: \_\_\_\_\_ Hourly Pay desired: \_\_\_\_\_

Please Check (x) weekly availability:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

**Education**

School Level	Name and Location of School	Number of years attended	Did you Graduate?	Subjects Studied
High School				
College				
Other				

**General**

Please describe your previous climbing experience:

Please describe other relevant skills or experience:



**Former Employers**

Please list your last three employers, starting with the most recent one first.

Name of Present or Last Employer		
Address		
Starting Date	Leaving Date	Job Title
Starting Salary	Final Salary	
Name of Supervisor	Phone No.	May we contact your supervisor?
Describe the work you did.		
Reason for Leaving?		

Name of Previous Employer		
Address		
Starting Date	Leaving Date	Job Title
Starting Salary	Final Salary	
Name of Supervisor	Phone No.	May we contact your supervisor?
Describe the work you did.		
Reason for Leaving?		

Name of Previous Employer		
Address		
Starting Date	Leaving Date	Job Title
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Name of Supervisor	Phone No.	May we contact your supervisor?
Describe the work you did.		
Reason for Leaving?		