Application for Employment

PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

Big Boulder Lake, LLC P O Box 707 Blakeslee, PA 18610

We consider applicants for all positions regardless of race, color, religion, sex, national origin, age, marital or veteran's status, disability, medical condition or handicap, or any other legally protected status.

Personal In	nformation			
Please print in ink	Data CA			
Name		Date of Application Social Security #		
Address				
City	State	Zip		
Cell Phone # ()	Alternate	# ()		
Email Address:				
Note: The Company does not hire persons age 18 or younger				
Are you legally eligible for employment in the United States?		Yes	No	
If offered employment, you will be required to provide documer	ntation to verify yo	ur eligibility		
Position(s) applying for Indoor/Office Outdoor	Date avai	Date available to start work		
Rate of pay expected				
What type of employment are you seeking? Full Time	Part Tim	e		
Have you ever worked for this company before?	Yes	No		
If yes, where?				
Are any of your relatives presently employed with the company	y?	Yes	No	
If yes, name of relative and department				
Were you ever discharged by any company?		Yes	No	
Reason for discharge				
Have you ever been convicted of a crime other than a minor tra automatically disqualify you from the job for which you are app		e existence of a c Yes	riminal record will No	l not
If yes, please explain offense and final disposition:				
Ed	ucation			
	Course of	Did You	Degree or	# of Ye

Education							
	Name and Address of School	Course of Study	Did You Graduate	Degree or Diploma	# of Years Completed		
High School							
College							
Other							
Skills/Certs							

	U.S. Mi	litary History		
Have you ever been a member of	f the Armed Forces of the Uni	ted States? Yes	No	
Branch	Fr	rom	То	
	Employ	ment History		
MOST RECENT OR CURRE	ENT EMPLOYMENT:			
Employer:	Fı	rom:	To:	
Phone:	Po	osition:		
Address:				
Duties:	Sı	apervisor's Name:		
May we inquire of your present	employer? Sa	alary/Wage:		
PRIOR EMPLOYMENT:				
Employer:	Fi	rom:	To:	
Phone:	Po	osition:		
Address:				
Duties:		upervisor's Name:		
Reason for Leaving:		alary/Wage:		
Reason for Leaving.	50	mary/wage.		
Employer:	Fı	From: To:		
Phone:	Po	Position:		
Address:				
Duties:	<u> </u>	upervisor's Name:		
Reason for Leaving:	Salary/Wage:			
Troubon for Bouring,		eferences		
NAMES OF PEOPLE NOT RELA			VFAR	
Name	Address	Telephone	Years Known	
I certify that the facts contained in employed; falsified statements on			owledge and understand that, if	
	ent and any pertinent informa	tion they may have, personal	to give you any and all information or otherwise, and release all parties fr	
I understand and agree that, if hire and salary, be terminated at any time		lefinite period and may, regard	lless of the date of payment of my wa	
Signature:		Date:		