

APPLICATION FOR EMPLOYMENT



LAKE PLACID CLUB

The Lake Placid Vacation Corporation (LPVC) provides equal employment opportunities to all qualified individuals without regard to race, color, religion, sex, gender identity, sexual orientation, pregnancy, age, national origin, physical or mental disability, military or veteran status, genetic information or any other protected classification. Equal employment opportunity includes, but is not limited to, hiring, training, promotion, demotion, transfer, leaves of absence, and termination.

Last Name:		First Name:		Middle Name:
Street Address:		City:	State:	Zip Code:
Telephone Number(s):		E-Mail Address:		

Position(s) Applied For:	Date of Application:
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How Did You Learn About Us?	<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other: _____

If hired, can you present evidence of your identity and legal right to work in this country? Yes No

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation? Yes No

We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

If hired, would you have a reliable means of transportation to and from work? Yes No

Have you ever been involuntarily terminated or asked to resign from any job? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify applicant from employment

Are you available to work: Full Time Part Time Shift Work Temporary

On what date would you be able to begin work for us? _____

Days and Hours you are available to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

EDUCATION:

	High School	Undergraduate College	Graduate / Professional	Other (specify)
School Name:				
Years Completed:				
Diploma / Degree:				
Course of Study:				

REFERENCES:

Name:	Telephone Number:	E-Mail Address:	Address:
Name:	Telephone Number:	E-Mail Address:	Address:
Name:	Telephone Number:	E-Mail Address:	Address:

List any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment:

APPLICANT STATEMENT AND AGREEMENT

Read and initial each paragraph below. If there is anything that you do not understand, please ask.

_____ I hereby authorize LPVC to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to LPVC any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release LPVC, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

_____ If I am employed by LPVC, I understand that I am required to comply with all rules and regulations of LPVC.

_____ If hired, I understand and agree that my employment with LPVC is at-will, and that neither I, nor LPVC is required to continue the employment relationship for any specific term. I further understand that LPVC or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.

_____ I understand that safety of employees is extremely important to LPVC and that LPVC is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.

_____ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

_____ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

MY SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREED TO ALL OF THE ABOVE TERMS.

Signature: _____

Name (print): _____ Date: _____