

Santa's Workshop

Cascade, CO 80809

719-684-9432



APPLICATION FOR EMPLOYMENT Equal Opportunity Employer 2020 Season

Last Name: _____ First Name _____

Mailing Address: _____

City/State/Zip Code: _____

Home Telephone: (_____) - _____ - _____ Cell number (_____) - _____ - _____

Social Security Number (after hire) _____

AGE: Check one of the following:

- 16 to 17 years of age 18 years of age or over
Age and Birth Date will be required after employment

IN CASE OF EMERGENCY NOTIFY:

Name of Parent, Guardian or Next of Kin: _____

The above person's relationship to you: _____

Address: _____

Daytime telephone number _____

Have you ever been employed by Santa's Workshop before? Yes No

If yes, give the year(s) you were employed _____

Name of Supervisor _____

SANTA'S WORKSHOP IS OPEN MID-MAY THRU DECEMBER 24

NOTE: Your availability dates are very important. Please give serious consideration to the dates you choose, because they will have a strong bearing on your application. Failure to comply with the dates you choose may affect future employment status.

I am available weekends until school is out for the summer Yes No

I can begin full-time from: _____

Beginning Date

Ending Date

I am available to work Labor Day Weekend Yes No

I can work weekends after school starts in the Fall Yes No

If you were hired is there any activity for any time this year when you would not be available to work a regular schedule? Such as family reunions, vacation, school activities like football camp, band, volleyball, etc.? If there is anything that might interrupt or delay your employment, please state and give dates:

.....
For Office Use

O: _____

PT _____

FT _____

Position _____ Where _____

Drug test scheduled _____

Employee # _____

T/C # _____

GL Acct _____ Job Class# _____

RFR _____

Results _____

MEDICAL HISTORY:

Can you perform the functions of the job for which you are applying with or without a reasonable accommodation? **Y** or **N** (Circle one) If No what can be done to accommodate any limitation you feel you may encounter: _____

EDUCATION:

	Name & Location	Circle highest grade completed as of June 2020
School		7 - 8 - 9 - 10 - 11 - 12
College		1 - 2 - 3 - 4
Other		1 - 2 - 3 - 4

EMPLOYMENT HISTORY

#1
EMPLOYER _____ **ADDRESS** _____
POSITION HELD _____ **SUPERVISOR** _____
DATES EMPLOYED: FROM ___ **TO** ___ **RATE OF PAY:** _____
PHONE NUMBER _____ **REASON FOR LEAVING** _____

#2
EMPLOYER _____ **ADDRESS** _____
POSITION HELD _____ **SUPERVISOR** _____
DATES EMPLOYED: FROM ___ **TO** ___ **RATE OF PAY:** _____
PHONE NUMBER _____ **REASON FOR LEAVING** _____

#3
EMPLOYER _____ **ADDRESS** _____
POSITION HELD _____ **SUPERVISOR** _____
DATES EMPLOYED: FROM ___ **TO** ___ **RATE OF PAY:** _____
PHONE NUMBER _____ **REASON FOR LEAVING** _____

SPECIAL SKILLS OR QUALIFICATIONS: _____

Have you ever been convicted of a felony? Yes No
If Yes, please explain: _____

How did you hear about Santa's Workshop? _____

Have you reliable transportation to work? _____
(Be specific) _____



I hereby certify the information provided by me in this Application for Employment is true, correct and complete to the best of my knowledge. I understand that the omission, falsification, and/or misrepresentation of any fact from this application or during any interview will be cause for rejection of my application or immediate dismissal if I become employed.

I authorize all employers, schools, and other organizations and persons' named on my application to provide any information relevant to an employment decision, and I release them from any/all liability whatsoever.

I further understand that Santa's Workshop is an at-will employer. This means that if I am employed, it is not for any specific time or duration. I understand that, just as I am free to resign at any time, Santa's Workshop reserves the right to terminate my employment at any time, with or without cause and without prior notice.

Signature Date