Santa's Workshop

Cascade, CO 80809 719-684-9432

APPLICATION FOR EMPLOYMENT Equal Opportunity Employer 2025 Season



Last Name	First Name	Preferred Name
Mailing Address:		
City/State/Zip Code:		
Cell number: ()		Email:
Are you legally authorized t	o work in the Unite	ed States? [] Yes [] No
Social Security Number or o	ther identification	number
[] 15 years of age [] Age and Birth Date will b	16 to 17 years se required after er	ne of the following: s of age [] 18 years of age or over nployment for compliance with Colorado's Youth t Opportunity Act
The above person's relation	r Next of Kin: ship to you:	
Daytime telephone number		
If yes, give the year(s) you were employ	sshop before? [] Yes [] No ed
SANTA'S	WORKSHOP IS OPI	EN MID-MAY THRU DECEMBER 24
	vill have a strong b	tant. Please give serious consideration to the dates earing on your application. Failure to comply with ment status.
I am available weekends un	til school is out for	the summer [] Yes [] No
I can begin full-time from:_	Beginning Da	 te
I am available to work Labo	Ending Date r Day Weekend	[] Yes [] No
I can work weekends after s	chool starts in the	Fall [] Yes [] No
work a regular schedule?	Such as family reu	time this year when you would not be available to nions, vacation, school activities like football camp, t might interrupt or delay your employment, please

EDUCATION:

	Name & Location	Circle highest grade completed as of June 2025
School		7 -8 - 9 - 10 - 11 - 12
College		1 - 2 - 3 - 4
Other		1 - 2 - 3 - 4

EMPLOYMENT HISTORY			
#1			
EMPLOYER		ADDRESS	
		SUPERVISOR	
DATES EMPLOYED: FROM	TO	RATE OF PAY:	
PHONE NUMBER		REASON FOR LEAVING	
#2			
EMPLOYER		ADDRESS	
POSITION HELD		SUPERVISOR	
		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 QUALIFICAT	ΓΙΟΝS:		
How did you hear about Santa's	Worksho	o?	
		?	

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.

Pre-employment Drug Screening Test. I understand that Santa's Workshop requires all Outdoor Park Personnel who receives a job to be tested for current use of illegal drugs. I also understand that the testing will be done at the company's expense, will require me to provide bodily substances (e.g., breath, urine, blood) and will be performed at a testing facility the company designates. I also understand that Santa's Workshop will not offer employment to anyone who fails the test or refuses to take the test. I agree to submit to drug screen testing as part of my application.

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.

Criminal Records Check. I understand Santa's Workshop may use the information I provided in this application to obtain a publicly available criminal background report at any time.

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	
		For Office Use		
0:				
PT				
FT				
Position	Where			