PO Box 520 250 Eastern Boulevard Canandaigua, NY 14424 585-396-2000 585-394-1445 Fax www.roselandwaterpark.com



OFFICE	USE ONLY
1.	
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3.	
Int Date/Time:	
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Roseland Waterpark is an equal opportunity employer. All applicants are considered without regard to race, age, color, gender, ethnic group, national origin, religion, citizenship, marital status, sexual orientation, veteran status, physical or mental disability, or medical condition.

physical or men				edical condition	on.											
PERSONAL IN Last Name	FORM	ATION	First Name MI								Today's Date					
Address			Town/Zip								Are you 18 years old or older? Yes No					
Home Telephor	ne	Cell Phone					Work T	ohone	Are you 15 years old or younger? Yes No							
E-Mail Address																
EMPLOYMENT DESIRED																
Position Applied for. (Choose at least one)							Seco	Second Choice:								
Would you like to work: (circle all that apply) Full Time Part Time							Wage Desired:									
What days and times are you available for work? (Also, indicate any days you are unable to work)							Start	Start Date:				End Date:				
Monday	Tu	Tuesday W		Wednesday	day Thurs		day	ay Friday		Saturday		ay		Sunday		
EDUCATION	EDUCATION															
Level	Level Name a			Number of and Address complete												
High School																
College, Vocational, Other																
MILITARY									1							
Branch			Dates of Service			Final Rank				Special Training						
			Start Date													
End Date																
SKILLS																
Certificates or S	Special	Trainir	ng													
Computer Skills	(hardv	vare/so	oftwa	are)												
Other Skills, Kn	owledg	je, Are	as of	f Expertise												
What clubs, org	janizati	ons, ci	vic o	or other groups	s have yo	ou be	en a m	eml	ber in the last	five y	ears	which	are r	elevant to		

this job? (exclude any membership which would reveal race, religion, sex, age, national origin, or ancestry of its members)

**EMPLOYMENT HISTORY** Please list employment record, starting with the most recent. **Employer Name and Address Dates of Employment Supervisor Name and Job Title Phone Number** From: To: Job Title Reason for Leaving Duties, Responsibilities, Promotions Salary **Dates of Employment Employer Name and Address Supervisor Name and Job Title** Phone Number From: To: Job Title Reason for Leaving Duties, Responsibilities, Promotions Salary **Dates of Employment Employer Name and Address** Supervisor Name and Job Title Phone Number From: To: Job Title Reason for Leaving Duties, Responsibilities, Promotions Salary **CHARACTER REFERENCES** List people who are not related to you and are not previous employers. Phone Number Relationship Name Years Known Phone Number Name Relationship Years Known Name Phone Number Relationship Years Known **GENERAL** Are you currently employed? Yes No If yes, may we contact your present employer? Yes No Have you ever worked for Roseland Waterpark before? Yes No If yes, which department? Have you ever worked for Bristol Mountain before? Yes No If yes, which department? Yes If yes, explain: Have you ever been convicted of a crime? No If offered employment, will you be able to provide proof of identity and authorization to work in the U.S.? Yes No If under 18 years old, will you be able to provide working papers from your school? **APPLICANT STATEMENT** I understand and agree to the following: This application is not a contract of employment. Should the employer hire me and should any of the information I have given in this application be found false, misleading, or incomplete, I shall be subject to dismissal. The employer follows an "at will" employment policy, meaning the employer or I may terminate employment at any time for any reason consistent with the applicable law. All hired persons must provide proof of identity and authorization to work in the U.S. Failure to produce such proof will result in denial of employment. I authorize investigation of all statements given on this application. The employer may contact any educational institution, reference, or employer listed on this application, except my current employer if so noted, to verify the information I have given. I authorize those employers to disclose to Roseland Waterpark all records pertinent to my employment with them. I certify that all the information in this application is complete and true. Date Signature of Applicant NEW APPLICATIONS WILL REMAIN ON FILE FOR THE CURRENT HIRING SEASON ONLY